

Exhibit 5.46

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Summary - PO 50047599

PO/Reference Number 50047599
Supplier Novogenix Laboratories LLC

General Information	Delivery	Billing						
<p>PO/Reference Number 50047599</p> <p>Revision Number 1</p> <p>A/P status Closed</p> <p>Supplier Name Novogenix Laboratories LLC</p> <p>DUNS Address [REDACTED]</p> <p>Purchase Order Date 3/12/2013</p> <p>Original Revision Date 3/12/2013</p> <p>Revision Date 5/31/2013</p> <p>Total 1,750.00 USD</p> <p>Requisition Number 37335568</p> <p>Business Purpose supplies for [REDACTED] lab</p> <p>Previous PO Number no value</p> <p>Contact Information</p> <p>Owner Name [REDACTED]</p> <p>Owner Phone [REDACTED]</p> <p>Owner Email [REDACTED]</p> <p>Campus HSC</p>	<p>Deliver To</p> <p>Attn: [REDACTED]</p> <p>Room [REDACTED]</p>	<p>Bill To</p> <p>USC Accounts Payable [REDACTED]</p> <p>Billing Options</p> <p>Contract no value</p> <p>Payment Terms 0% 30, Net 30</p> <p>Place Invoice on Hold *</p> <p>Check Routing no value</p>						
<p>Additional Information</p> <p>Quote Number no value</p> <p>FOB FOB USC</p> <p>Payment Term Exception no value</p> <p>Payment Term Standard</p> <p>PO Clauses no clause</p>	<p>Capital Asset Management</p> <p>Capital Asset System Type no value</p> <p>Capital Asset System State no value</p> <p>Equipment Notes no value</p>	<p>Facilities</p> <table border="1"><thead><tr><th>Facilities</th><th>Work Order Number</th></tr></thead><tbody><tr><td>Crew Number</td><td></td></tr><tr><td>no value</td><td>no value</td></tr></tbody></table> <p>Stock Number no value</p>	Facilities	Work Order Number	Crew Number		no value	no value
Facilities	Work Order Number							
Crew Number								
no value	no value							

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Number of Bids	no value	Capital Asset	Transaction Type	Asset #	Trade In Value
Diversity Bids	no value	Transaction Type	Instructions		
High Dollar Approvals	x				
CA Income Tax	7%	no value	no value	no value	no value
Withholding Percentage					
Buyer Review	x				
Buyer Name	Buyer Email	Buyer Phone			
Department Contact	See below	See below			

Accounting Codes

Account Number	Validation Code	Object Code	Overdraft Funds Request (use only with resubmission)	Organization Code	Account Type Code	Sub-Fund Group Code	Spa Code	C&G Code	Fiscal Year
Gene therapy using Hematopoietic Stem C							no value	no value	2013
M&S LABORATORY EXPENSE									

External Notes and Attachments

Note to Supplier no note
Attachments for supplier

Internal Notes and Attachments

Internal Note no note
Internal Attachments

Distribution Information

Distribution Methods

The system will distribute purchase orders using the method(s) indicated below:

Fax

☒ Distribution options have been overridden for this PO

Line Item Details

Product Description	Catalog No	Size / Packaging	Unit Price	Quantity	Ext. Price
1 <input checked="" type="checkbox"/> human fetal liver		EA	350.00 USD	5 EA	1,750.00 USD
Delivery Address In California?	Yes	Taxable	x	Requisition Number	37335568
Tangible Item?	Yes	Commodity Code	23	External Note	no note
Vendor outside of California?	No	Research/Lab Supply & Equip		Attachments for supplier	
Vendor outside of US?	No	PO Clauses		Internal Note	no note
		no clause		Internal Attachments	

Shipping, Handling, and Tax charges are calculated and charged by each supplier. The values shown here are for estimation purposes, fund checking, and workflow approvals.	Subtotal	1,750.00
	Sales Tax	0.00
	Shipping Only	0.00
	Shipping and Handling	0.00
	Total	1,750.00 USD

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Summary - PO 50057237

PO/Reference Number 50057237
Supplier Novogenix Laboratories LLC

General Information	Delivery	Billing
PO/Reference Number 50057237	Deliver To	Bill To
Revision Number 1	Attn: [REDACTED]	USC Accounts Payable
A/P status Closed	Room [REDACTED]	[REDACTED]
Supplier Name Novogenix Laboratories LLC	[REDACTED]	
DUNS Address [REDACTED]		Billing Options
Purchase Order Date 4/11/2013		Contract no value
Original Revision Date 4/11/2013		Payment 0% 30, Net 30
Revision Date 4/15/2013		Terms
Total 2,100.00 USD		Place Invoice <input checked="" type="checkbox"/>
Requisition Number 38604073		on Hold
Business Purpose supplies for lab [REDACTED]		Check Routing no value
Previous PO Number no value		
Contact Information		
Owner Name [REDACTED]		
Owner Phone [REDACTED]		
Owner Email [REDACTED]		
Campus		
HSC		
Additional Information	Capital Asset Management	Facilities
Quote Number no value	Capital Asset System no value	Facilities
FOB FOB USC	Type	Crew Number Work Order Number
Payment Term Exception no value	Capital Asset System no value	
Payment Term Standard	State	no value no value
PO Clauses no clause	Equipment Notes no value	
		Stock Number no value

Number of Bids	no value	Capital Asset Transaction Type	Asset #	Trade In Value
Diversity Bids	no value	Transaction Instructions		
High Dollar Approvals	*			
CA Income Tax Withholding Percentage	7%	no value	no value	no value
Buyer Review	*			
Buyer Name	Buyer Email	Buyer Phone		
Department Contact	See below	See below		

Accounting Codes

Account Number	Validation Code	Object Code	Overdraft Funds Request (use only with resubmission)	Organization Code	Account Type Code	Sub-Fund Group Code	Spa Code	C&G Code	Fiscal Year
[REDACTED]							no value	no value	2013
Gene therapy using Hematopoietic Stem C		M&S LABORATORY EXPENSE							

External Notes and Attachments

Note to Supplier no note

Attachments for supplier

[REDACTED] 12 13 12 ... (33k)

Internal Notes and Attachments

Internal Note no note

Internal Attachments

[REDACTED] 12 13 12 ... (33k)

Distribution Information

Distribution Methods

The system will distribute purchase orders using the method(s) indicated below:

Fax [REDACTED]

☒ Distribution options have been overridden for this PO

Line Item Details

Product Description	Catalog No	Size / Packaging	Unit Price	Quantity	Ext. Price
1 <input checked="" type="checkbox"/> tissue procurment		EA	350.00 USD	6 EA	2,100.00 USD
Taxable	<input checked="" type="checkbox"/>		Requisition Number	38604073	
Commodity Code	23	Research/Lab Supply & Equip	External Note	no note	
PO Clauses			Attachments for supplier		
no clause			Internal Note	no note	
			Internal Attachments		

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Shipping, Handling, and Tax charges are calculated and charged by each supplier. The values shown here are for estimation purposes, fund checking, and workflow approvals.

Subtotal	2,100.00
Sales Tax	0.00
Shipping Only	0.00
Shipping and Handling	0.00
Total	2,100.00 USD

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Summary - PO 50057240

PO/Reference Number 50057240
 Supplier Novogenix Laboratories Llc

General Information		Delivery	Billing	
PO/Reference Number	50057240	Deliver To	Bill To	
Revision Number	1	Attn: [REDACTED]	USC Accounts Payable	
A/P status	Closed	Room [REDACTED]		
Supplier Name	Novogenix Laboratories Llc			
DUNS Address	[REDACTED]		Billing Options	
Purchase Order Date	4/11/2013		Contract	no value
Original Revision Date	4/11/2013		Payment Terms	0% 30, Net 30
Revision Date	4/23/2013		Place Invoice on Hold	X
Total	1,750.00 USD		Check Routing	no value
Requisition Number	38603063			
Business Purpose	supplies for lab [REDACTED]			
Previous PO Number	no value			
Contact Information				
Owner Name	[REDACTED]			
Owner Phone	[REDACTED]			
Owner Email	[REDACTED]			
Campus				
HSC				
Additional Information		Capital Asset Management	Facilities	
Quote Number	no value	Capital Asset	Facilities	
FOB	FOB USC	System Type	Crew Number	Work Order Number
Payment Term Exception	no value	Capital Asset		
Payment Term	Standard	System State	no value	no value
PO Clauses		Equipment Notes		
		no value		

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no clause		Capital Asset	Transaction Type	Asset #	Trade In Value	Stock Number	no value
Number of Bids	no value	Transaction Type	Instructions				
Diversity Bids	no value						
High Dollar Approvals	x	no value	no value	no value	no value		
CA Income Tax Withholding Percentage	7%						
Buyer Review	x						
Buyer Name	Buyer Email	Buyer Phone					
Department Contact	See below	See below					

Accounting Codes

Account Number	Validation Code	Object Code	Overdraft Funds Request (use only with resubmission)	Organization Code	Account Type Code	Sub-Fund Group Code	Spa Code	C&G Code	Fiscal Year
Zinc Finger Nuclease-Based Stem Cell Th							no value	no value	2013
M&S LABORATORY EXPENSE									

External Notes and Attachments Note to Supplier no note Attachments for supplier	Internal Notes and Attachments Internal Note Please note that PO# 50047599 was cancelled and this invoice was never paid. Internal Attachments	Distribution Information Distribution Methods The system will distribute purchase orders using the method(s) indicated below: Fax +1 (213) 740-9797 <input checked="" type="checkbox"/> Distribution options have been overridden for this PO
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Line Item Details

Product Description	Catalog No	Size / Packaging	Unit Price	Quantity	Ext. Price
1 ✓ sample procurement		EA	350.00 USD	5 EA	1,750.00 USD
Taxable	✓		Requisition Number	38603063	
Commodity Code	23	Research/Lab Supply & Equip	External Note	no note	
			Attachments for supplier		

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PO Clauses

no clause

Internal Note no note

Internal Attachments

Shipping, Handling, and Tax charges are calculated and charged by each supplier. The values shown here are for estimation purposes, fund checking, and workflow approvals.

Subtotal	1,750.00
Sales Tax	0.00
Shipping Only	0.00
Shipping and Handling	0.00
Total	1,750.00 USD

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Summary - PO 50068895

PO/Reference Number 50068895
Supplier Novogenix Laboratories LLC

General Information	Delivery	Billing
PO/Reference Number 50068895	Deliver To	Bill To
Revision Number 1	Attn: [REDACTED]	USC Accounts Payable
A/P status Closed	Room [REDACTED]	[REDACTED]
Supplier Name Novogenix Laboratories LLC		
DUNS Address [REDACTED]		Billing Options
Purchase Order Date 5/20/2013		Contract no value
Original Revision Date 5/20/2013		Payment 0% 30, Net 30
Revision Date 5/21/2013		Terms
Total 2,450.00 USD		Place Invoice <input checked="" type="checkbox"/>
Requisition Number 37334789		on Hold
Business Purpose Pay for passed to invoice		Check Routing no value
Previous PO Number no value		
Contact Information		
Owner Name [REDACTED]		
Owner Phone [REDACTED]		
Owner Email [REDACTED]		
Campus		
HSC		
Additional Information	Capital Asset Management	Facilities
Quote Number no value	Capital Asset System no value	Facilities
FOB FOB USC	Type	Crew Number Work Order Number
Payment Term Exception no value	Capital Asset System no value	
Payment Term Standard	State	no value no value
PO Clauses no clause	Equipment Notes no value	
		Stock Number no value

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Number of Bids	no value	Capital Asset	Transaction Type	Asset #	Trade In Value
Diversity Bids	no value	Transaction Type	Instructions		
Business Associate Agreement (BAA)	<input checked="" type="checkbox"/>				
Data Security Addendum (DSA)	<input checked="" type="checkbox"/>	no value	no value	no value	no value
High Dollar Approvals	<input checked="" type="checkbox"/>				
CA Income Tax Withholding Percentage	7%				
Buyer Review	<input checked="" type="checkbox"/>				
Buyer Name	Buyer Email	Buyer Phone			
Department Contact	See below	See below			

Accounting Codes

Account Number	Validation Code	Object Code	Overdraft Funds Request (use only with resubmission)	Organization Code	Account Type Code	Sub-Fund Group Code	Spa Code	C&G Code	Fiscal Year
							no value	no value	2013
Using Hematopoietic Stem C		LABORATORY EXPENSE							

External Notes and Attachments

Note to Supplier no note
Attachments for supplier

Internal Notes and Attachments

Internal Note no note
Internal Attachments

Distribution Information

Distribution Methods

The system will distribute purchase orders using the method(s) indicated below:







Fax

☒ Distribution options have been overridden for this PO

Line Item Details

Product Description	Catalog No	Size / Packaging	Unit Price	Quantity	Ext. Price
1 <input checked="" type="checkbox"/> human fetal liver		EA	350.00 USD	1 EA	350.00 USD
Delivery Address In California?	Yes	Taxable	<input checked="" type="checkbox"/>	Requisition Number	37334789
Tangible Item?	Yes	Commodity Code	23	External Note	no note
Vendor outside of California?	No	Research/Lab Supply & Equip		Attachments for supplier	
Vendor outside of US?	No				

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		PO Clauses no clause		Internal Note no note Internal Attachments	
2	✓ human fetal liver 	EA		350.00 USD	1 EA 350.00 USD
	Delivery Address In California?	Yes	Taxable	✗	Requisition 37334789
	Tangible Item?	Yes	Commodity	23	Number
	Vendor outside of California?	No	Code	Research/Lab	External Note no note
	Vendor outside of US?	No		Supply & Equip	Attachments for supplier
			PO Clauses		Internal Note no note
				no clause	Internal Attachments
3	✓ human fetal liver 	EA		350.00 USD	1 EA 350.00 USD
	Delivery Address In California?	Yes	Taxable	✗	Requisition 37334789
	Tangible Item?	Yes	Commodity	23	Number
	Vendor outside of California?	No	Code	Research/Lab	External Note no note
	Vendor outside of US?	No		Supply & Equip	Attachments for supplier
			PO Clauses		Internal Note no note
				no clause	Internal Attachments
4	✓ Human fetal liver 	EA		350.00 USD	1 EA 350.00 USD
	Delivery Address In California?	Yes	Taxable	✗	Requisition 37334789
	Tangible Item?	Yes	Commodity	23	Number
	Vendor outside of California?	No	Code	Research/Lab	External Note no note
	Vendor outside of US?	No		Supply & Equip	Attachments for supplier
			PO Clauses		Internal Note no note
				no clause	Internal Attachments
5	✓ Human fetal liver 	EA		350.00 USD	1 EA 350.00 USD
	Delivery Address In California?	Yes	Taxable	✗	Requisition 37334789
	Tangible Item?	Yes	Commodity	23	Number
	Vendor outside of California?	No	Code	Research/Lab	External Note no note
	Vendor outside of US?	No		Supply & Equip	Attachments for supplier
			PO Clauses		Internal Note no note
				no clause	Internal Attachments
6	✓ human fetal liver 	EA		350.00 USD	1 EA 350.00 USD
	Delivery Address In California?	Yes	Taxable	✗	Requisition 37334789
	Tangible Item?	Yes	Commodity	23	Number
	Vendor outside of California?	No	Code	Research/Lab	External Note no note
	Vendor outside of US?	No		Supply & Equip	Attachments for supplier
			PO Clauses		Internal Note no note
				no clause	Internal Attachments
7	✓ Human fetal liver 	EA		350.00 USD	1 EA 350.00 USD
	Delivery Address In California?	Yes	Taxable	✗	37334789

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Tangible Item?	Yes	Commodity	23	Requisition
Vendor outside of California?	No	Code	Research/Lab	Number
Vendor outside of US?	No	PO Clauses	Supply & Equip	External Note <i>no note</i>
				Attachments for supplier
				Internal Note <i>no note</i>
				Internal Attachments

Shipping, Handling, and Tax charges are calculated and charged by each supplier. The values shown here are for estimation purposes, fund checking, and workflow approvals.	Subtotal	2,450.00
	Sales Tax	0.00
	Shipping Only	0.00
	Shipping and Handling	0.00
	Total	2,450.00 USD

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Summary - PO 50068898

PO/Reference Number 50068898
Supplier Novogenix Laboratories Llc

General Information	Delivery	Billing
PO/Reference Number 50068898	Deliver To	Bill To
Revision Number 1	Attn: [REDACTED]	[REDACTED]
A/P status Closed	Room [REDACTED]	
Supplier Name Novogenix Laboratories Llc		
DUNS Address [REDACTED]		Billing Options
Purchase Order Date 5/20/2013		Contract no value
Original Revision Date 5/20/2013		Payment 0% 30, Net 30
Revision Date 5/21/2013		Terms
Total 2,100.00 USD		Place Invoice <input checked="" type="checkbox"/>
Requisition Number 37335089		on Hold
Business Purpose Pay for passed to invoice		Check Routing no value
Previous PO Number no value		
Contact Information		
Owner Name [REDACTED]		
Owner Phone [REDACTED]		
Owner Email [REDACTED]		
Campus		
HSC		
Additional Information	Capital Asset Management	Facilities
Quote Number no value	Capital Asset System no value	Facilities
FOB FOB USC	Type	Crew Number Work Order Number
Payment Term Exception no value	Capital Asset System no value	
Payment Term Standard	State	no value no value
PO Clauses no clause	Equipment Notes no value	
		Stock Number no value

Number of Bids	no value	Capital Asset	Transaction Type	Asset #	Trade In Value
Diversity Bids	no value	Transaction Type	Instructions		
Business Associate Agreement (BAA)	<input checked="" type="checkbox"/>				
Data Security Addendum (DSA)	<input checked="" type="checkbox"/>	no value	no value	no value	no value
High Dollar Approvals	<input checked="" type="checkbox"/>				
CA Income Tax Withholding Percentage	7%				
Buyer Review	<input checked="" type="checkbox"/>				
Buyer Name	Buyer Email	Buyer Phone			
Department Contact	See below	See below			

Accounting Codes

Account Number	Validation Code	Object Code	Overdraft Funds Request (use only with resubmission)	Organization Code	Account Type Code	Sub-Fund Group Code	Spa Code	C&G Code	Fiscal Year
[REDACTED]							no value	no value	2013
Gene Therapy Using Hematopoietic Stem C		M&S LABORATORY EXPENSE							

External Notes and Attachments

Note to Supplier no note
Attachments for supplier

Internal Notes and Attachments

Internal Note no note
Internal Attachments

Distribution Information


Distribution Methods

The system will distribute purchase orders using the method(s) indicated below:

Fax [REDACTED]

☒ Distribution options have been overridden for this PO

Line Item Details

Product Description	Catalog No	Size / Packaging	Unit Price	Quantity	Ext. Price
1 <input checked="" type="checkbox"/> human fetal liver 		EA	350.00 USD	1 EA	350.00 USD
Delivery Address In California?	Yes	Taxable	<input checked="" type="checkbox"/>	Requisition Number	37335089
Tangible Item?	Yes	Commodity Code	23	External Note	no note
Vendor outside of California?	No	Research/Lab Supply & Equip		Attachments for supplier	
Vendor outside of US?	No				

		PO Clauses		Internal Note	
		no clause		no note	Internal Attachments
2	✓ Human fetal liver		EA	350.00 USD	1 EA 350.00 USD
Delivery Address In California?	Yes	Taxable	✗	Requisition	37335089
Tangible Item?	Yes	Commodity	23	Number	
Vendor outside of California?	No	Code	Research/Lab	External Note	no note
Vendor outside of US?	No		Supply & Equip	Attachments for supplier	
		PO Clauses		Internal Note	no note
		no clause		Internal Attachments	
3	✓ Human fetal liver		EA	350.00 USD	1 EA 350.00 USD
Delivery Address In California?	Yes	Taxable	✗	Requisition	37335089
Tangible Item?	Yes	Commodity	23	Number	
Vendor outside of California?	No	Code	Research/Lab	External Note	no note
Vendor outside of US?	No		Supply & Equip	Attachments for supplier	
		PO Clauses		Internal Note	no note
		no clause		Internal Attachments	
4	✓ Human fetal liver		EA	350.00 USD	1 EA 350.00 USD
Delivery Address In California?	Yes	Taxable	✗	Requisition	37335089
Tangible Item?	Yes	Commodity	23	Number	
Vendor outside of California?	No	Code	Research/Lab	External Note	no note
Vendor outside of US?	No		Supply & Equip	Attachments for supplier	
		PO Clauses		Internal Note	no note
		no clause		Internal Attachments	
5	✓ human fetal liver		EA	350.00 USD	1 EA 350.00 USD
Delivery Address In California?	Yes	Taxable	✗	Requisition	37335089
Tangible Item?	Yes	Commodity	23	Number	
Vendor outside of California?	No	Code	Research/Lab	External Note	no note
Vendor outside of US?	No		Supply & Equip	Attachments for supplier	
		PO Clauses		Internal Note	no note
		no clause		Internal Attachments	
6	✓ human fetal liver		EA	350.00 USD	1 EA 350.00 USD
Delivery Address In California?	Yes	Taxable	✗	Requisition	37335089
Tangible Item?	Yes	Commodity	23	Number	
Vendor outside of California?	No	Code	Research/Lab	External Note	no note
Vendor outside of US?	No		Supply & Equip	Attachments for supplier	
		PO Clauses		Internal Note	no note
		no clause		Internal Attachments	
				Subtotal	2,100.00

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Shipping, Handling, and Tax charges are calculated and charged by each supplier. The values shown here are for estimation purposes, fund checking, and workflow approvals.

Sales Tax	0.00
Shipping Only	0.00
Shipping and Handling	0.00
Total	2,100.00 USD

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Summary - PO 50103588

PO/Reference Number 50103588
Supplier Novogenix Laboratories LLC

General Information	Delivery	Billing
PO/Reference Number 50103588	Deliver To	Bill To
Revision Number 1	Attn: [REDACTED]	USC Accounts Payable
A/P status Closed	Room [REDACTED]	[REDACTED]
Supplier Name Novogenix Laboratories LLC	[REDACTED]	
DUNS Address [REDACTED]		Billing Options
Purchase Order Date 8/30/2013		Contract <i>no value</i>
Original Revision Date 8/30/2013		Payment 0% 30, Net 30
Revision Date 1/29/2014		Terms
Distribution Date/Time 8/30/2013 11:39 AM		Place Invoice <input checked="" type="checkbox"/>
Total 700.00 USD		on Hold
Requisition Number 42775472		
Business Purpose Novogenix-lab [REDACTED]		Check Routing <i>no value</i>
Previous PO Number <i>no value</i>		
Contact Information		
Owner Name [REDACTED]		
Owner Phone [REDACTED]		
Owner Email [REDACTED]		
Campus		
HSC		
Additional Information	Capital Asset Management	Facilities
Quote Number <i>no value</i>	Capital Asset <i>no value</i>	Facilities
FOB FOB USC	System Type	Crew Number Work Order Number

Payment Term Exception	no value	Capital Asset System State	no value	no value		no value			
Payment Term	Standard	Equipment Notes	no value	no value					
PO Clauses	no clause								
Number of Bids	no value	Capital Asset Transaction Type	Asset #	Trade In Value	Stock Number				
Diversity Bids	no value	Transaction Instructions			no value				
Business Associate Agreement (BAA)	X								
Data Security Addendum (DSA)	X								
High Dollar Approvals	X								
CA Income Tax Withholding Percentage	7%								
Buyer Review	X								
Buyer Name	Buyer Email	Buyer Phone							
Department Contact	See below	See below							
Accounting Codes									
Account Number	Validation Code	Object Code	Overdraft Funds Request (use only with resubmission)	Organization Code	Account Type Code	Sub-Fund Group Code	Spa Code	C&G Code	Fiscal Year
[REDACTED]							no value	no value	2014
SUPPORT 11 12 13 14 15 16 18 CU EX		M&S LABORATORY EXPENSE							
External Notes and Attachments			Internal Notes and Attachments			Distribution Information			
Note to Supplier no note			Internal Note no note			Distribution Methods			
Attachments for supplier			Internal Attachments			The system will distribute purchase orders using the method(s) indicated below:			
[REDACTED] Invoice 8 ... (138k)			[REDACTED] Invoice 8 ... (138k)			Fax [REDACTED]			
Line Item Details									

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Product Description	Catalog No	Size / Packaging	Unit Price	Quantity	Ext. Price
1 ✓ Enzymatic dissociation EDA: 120 	51999-2.14 ED.1	EA	350.00 USD	1 EA	350.00 USD
Multiple payments expected or Services are being purchased false	Taxable ✓		Requisition Number	42775472	
Radioactive product being purchased false	Commodity Code 23 Research/Lab Supply & Equip		External Note	no note	
	PO Clauses no clause		Attachments for supplier		
			Internal Note	no note	
			Internal Attachments		
2 ✓ Enzymatic dissociation EDA: 5.2 	52194- 16.1ED.1	EA	350.00 USD	1 EA	350.00 USD
	Taxable ✓		Requisition Number	42775472	
	Commodity Code 23 Research/Lab Supply & Equip		External Note	no note	
	PO Clauses no clause		Attachments for supplier		
			Internal Note	no note	
			Internal Attachments		
Shipping, Handling, and Tax charges are calculated and charged by each supplier. The values shown here are for estimation purposes, fund checking, and workflow approvals.			Subtotal		700.00
			Sales Tax		0.00
			Shipping Only		0.00
			Shipping and Handling		0.00
			Total		700.00 USD

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Summary - PO 50155524

PO/Reference Number 50155524
Supplier Novogenix Laboratories Llc

General Information		Delivery	Billing	
PO/Reference Number	50155524	Deliver To	Bill To	
Revision Number	1	Attn: [REDACTED]	USC Accounts Payable	
A/P status	Closed	Room [REDACTED]		
Supplier Name	Novogenix Laboratories Llc			
DUNS Address	[REDACTED]		Billing Options	
Purchase Order Date	2/18/2014		Contract	no value
Original Revision Date	2/18/2014		Payment Terms	0% 30, Net 30
Revision Date	2/28/2014		Place Invoice	<input checked="" type="checkbox"/>
Distribution Date/Time	2/18/2014 11:45 AM		on Hold	
Total	200.00 USD		Check Routing	no value
Requisition Number	47674179			
Business Purpose	2351781005			
Previous PO Number	no value			
Contact Information				
Owner Name	[REDACTED]			
Owner Phone	[REDACTED]			
Owner Email	[REDACTED]			
Campus				
	HSC			
Additional Information		Capital Asset Management	Facilities	
Quote Number	no value	Capital Asset System Type	Facilities	
FOB	FOB USC	Capital Asset System State	Crew Number	Work Order Number
Payment Term Exception	no value			
			no value	no value

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Payment Term	Standard	Equipment Notes		no value		Stock Number		no value	
PO Clauses	no clause	Capital Asset	Transaction Type	Asset #	Trade In Value				
Number of Bids	no value	Transaction Instructions							
Diversity Bids	no value	Type							
Business Associate	x	no value	no value	no value	no value				
Agreement (BAA)									
Data Security	x								
Addendum (DSA)									
High Dollar Approvals	x								
CA Income Tax Withholding Percentage	7%								
Buyer Review	x								
Buyer Name	Buyer Email	Buyer Phone							
Department Contact	See below	See below							

Accounting Codes

Account Number	Validation Code	Object Code	Overdraft Funds Request (use only with resubmission)	Organization Code	Account Type Code	Sub-Fund Group Code	Spa Code	C&G Code	Fiscal Year
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IMPACT OF CD22 DELTA E12 GENETIC DEFECT	21 22 23 24 25 26 27 28 CR EX	M&S LABORATORY EXPENSE					no value	no value	2014
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External Notes and Attachments

Note to Supplier no note

Attachments for supplier

Internal Notes and Attachments

Internal Note no note

Internal Attachments

Distribution Information**Distribution Methods**

The system will distribute purchase orders using the method(s) indicated below:

Fax

**Line Item Details**


Product Description

Catalog No

Size / Packaging

Unit Price Quantity Ext. Price

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1 <input checked="" type="checkbox"/> Procurement, processing, and delivery 		44352-12.7-2	EA	200.00 USD	1 EA	200.00 USD
Multiple payments expected or Services are being purchased	false	Taxable	<input checked="" type="checkbox"/>	Requisition Number	47674179	
Radioactive product being purchased	false	Commodity Code	23	External Note	no note	
		Research/Lab Supply & Equip		Attachments for supplier		
		PO Clauses		Internal Note	no note	
		no clause		Internal Attachments		
Shipping, Handling, and Tax charges are calculated and charged by each supplier. The values shown here are for estimation purposes, fund checking, and workflow approvals.				Subtotal	200.00	
				Sales Tax	0.00	
				Shipping Only	0.00	
				Shipping and Handling	0.00	
				Total	200.00 USD	

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Summary - PO 50184375

PO/Reference Number 50184375
Supplier Novogenix Laboratories Llc

General Information		Delivery	Billing
PO/Reference Number	50184375	Deliver To	Bill To
Revision Number	1	Attn: [REDACTED] Room [REDACTED]	USC Accounts Payable [REDACTED]
A/P status	Closed		
Supplier Name	Novogenix Laboratories Llc		
DUNS Address	[REDACTED]		
Purchase Order Date	5/14/2014		
Original Revision Date	5/14/2014		
Revision Date	6/4/2014		
Distribution Date/Time	5/14/2014 9:39 AM		
Total	1,000.00 USD		
Requisition Number	50258561		
Business Purpose	Human tissue for research		
Previous PO Number	no value		
Contact Information			
Owner Name	[REDACTED]		
Owner Phone	[REDACTED]		
Owner Email	[REDACTED]		
Campus			
HSC			
Additional Information	Capital Asset Management	Facilities	

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FOB	FOB USC	Capital Asset	no value		Facilities	
Payment Term Exception	no value	System Type				
Payment Term	Standard	Capital Asset System State	no value			
PO Clauses	no clause	Equipment Notes	no value			
CA Income Tax	7%				Crew Number	Work Order Number
Withholding Percentage					no value	no value
Buyer Review	x					
		Capital Asset Transaction Type	Asset #	Trade In Value	Stock Number	no value
Buyer Name	Buyer Email	Buyer Phone				
Department Contact	See below	See below				

Accounting Codes

Account Number	Validation Code	Object Code	Fiscal Year
[REDACTED]			2014
Reprogramming human epidermal and derma 51 52 53 54 55 56 57 58 CP ALL M&S LABORATORY EXPENSE			

External Notes and Attachments	Internal Notes and Attachments	Distribution Information
Note to Supplier no note Attachments for supplier Novogenix app re... (34k) Novogenix Custome... (253k) Novogenix Investi... (50k) Novogenix Investi... (16k)	Internal Note no note Internal Attachments AGP User Certific... (52k) Serology waiver l... (61k)	Distribution Methods The system will distribute purchase orders using the method(s) indicated below: Fax [REDACTED]

Line Item Details

Product Description	Catalog No	Size / Packaging	Unit Price	Quantity	Ext. Price
1 ✓ Human tissue		EA	1,000.00 USD	1 EA	1,000.00 USD
	Taxable	x		Requisition Number	50258561
	Commodity Code	23 Research/Lab Supply & Equip		External Note	no note
	PO Clauses			Attachments for supplier	

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no clause

Internal Note no note

Internal Attachments

Shipping, Handling, and Tax charges are calculated and charged by each supplier. The values shown here are for estimation purposes, fund checking, and workflow approvals.

Subtotal	1,000.00
Sales Tax	0.00
Shipping Only	0.00
Shipping and Handling	0.00
Total	1,000.00 USD

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Summary - PO 50208706

PO/Reference Number 50208706
Supplier Novogenix Laboratories Llc

General Information		Delivery	Billing
PO/Reference Number	50208706	Deliver To	Bill To
Revision Number	1	Attn: [REDACTED] Room [REDACTED]	USC Accounts Payable
A/P status	Closed	[REDACTED]	[REDACTED]
Supplier Name	Novogenix Laboratories Llc		
DUNS Address	[REDACTED]		Billing Options
Purchase Order Date	7/24/2014		Contract <i>no value</i>
Original Revision Date	7/24/2014		Payment Terms 0% 30, Net 30
Revision Date	7/25/2014		Place Invoice on <input checked="" type="checkbox"/> Hold
Total	431.20 USD		Check Routing <i>no value</i>
Requisition Number	51887337		
Business Purpose	Research Supplies		
Previous PO Number	<i>no value</i>		
Contact Information			
Owner Name	[REDACTED]		
Owner Phone	[REDACTED]		
Owner Email	[REDACTED]		
Campus			
HSC			
Additional Information		Capital Asset Management	Facilities
FOB	FOB USC	Capital Asset System Type <i>no value</i>	Facilities
			Crew Number Work Order

Payment Term	no value	Capital Asset	no value	Number	
Exception		System State		no value	no value
Payment Term	Standard	Equipment	no value		
PO Clauses		Notes			
	no clause			Stock Number	no value
CA Income Tax	7%	Capital Asset	Asset #	Trade In	
Withholding		Transaction		Value	
Percentage		Type			
Buyer Review	x				
		no value	no value	no value	
Buyer Name	Buyer Email	Buyer Phone			
Department	See below	See below			
Contact					

Accounting Codes

Account Number	Validation Code	Object Code	Fiscal Year
no value	no value	no value	2015

Accounting Codes values vary by line

External Notes and Attachments	Internal Notes and Attachments	Distribution Information
Note to Supplier no note	Internal Note no note	Distribution Methods
Attachments for supplier	Internal Attachments	The system will distribute purchase orders using the method(s) indicated below:
		Fax
		Distribution options have been overridden for this PO

Line Item Details

Product Description	Catalog No	Size / Packaging	Unit Price	Quantity	Ext. Price
1 <input checked="" type="checkbox"/> Procurement and processing		EA	400.00 USD	1 EA	400.00 USD
Accounting Codes values have been overridden for this line					
Delivery Address In California?	Yes	Taxable <input checked="" type="checkbox"/>		Requisition Number	51887337
Tangible Item?	No	Commodity Code	23	External Note	no note
Vendor outside of California?	No	Supply & Equip		Attachments for supplier	
Vendor outside of US?	No	PO Clauses		Internal Note	no note
		no clause			

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Shipping, Handling, and Tax charges are calculated and charged by each supplier.
The values shown here are for estimation purposes, fund checking, and workflow approvals.

Subtotal	400.00
Sales Tax	0.00
Shipping Only	31.20
Shipping and Handling	0.00
Total	431.20 USD

Summary - PO 50208711

PO/Reference Number 50208711
 Supplier Novogenix Laboratories Llc

General Information		Delivery	Billing	
PO/Reference Number	50208711	Deliver To	Bill To	
Revision Number	1	Attn: [REDACTED]	USC Accounts Payable	
A/P status	Closed	Room [REDACTED]	[REDACTED]	
Supplier Name	Novogenix Laboratories Llc			
DUNS Address	[REDACTED]		Billing Options	
Purchase Order Date	7/24/2014		Contract	no value
Original Revision Date	7/24/2014		Payment Terms	0% 30, Net 30
Revision Date	7/25/2014		Place Invoice on Hold	x
Total	629.60 USD		Check Routing	no value
Requisition Number	52529274			
Business Purpose	Research Supplies			
Previous PO Number	no value			
Contact Information				
Owner Name	[REDACTED]			
Owner Phone	[REDACTED]			
Owner Email	[REDACTED]			
Campus				
HSC				
Additional Information		Capital Asset Management	Facilities	
FOB	FOB USC	Capital Asset System Type	no value	
[REDACTED]			Facilities	
			Crew Number	Work Order


Payment Term Exception	no value	Capital Asset System State	no value	Number	
Payment Term	Standard	Equipment Notes	no value	no value	no value
PO Clauses	no clause			Stock Number	no value
CA Income Tax Withholding Percentage	7%	Capital Asset Transaction Type	Asset #	Trade In Value	
Buyer Review	x	no value	no value	no value	
Buyer Name	Buyer Email	Buyer Phone			
Department Contact	See below	See below			

Accounting Codes

Account Number	Validation Code	Object Code	Fiscal Year
			2015
Evaluation of Cellular Heterogeneity Us	51 52 53 54 55 56 57 58 CG ALL	M&S LABORATORY EXPENSE	

External Notes and Attachments	Internal Notes and Attachments	Distribution Information
Note to Supplier no note	Internal Note no note	Distribution Methods
Attachments for supplier	Internal Attachments	The system will distribute purchase orders using the method(s) indicated below:
		Fax
		<input checked="" type="checkbox"/> Distribution options have been overridden for this PO

Line Item Details

Product Description	Catalog No	Size / Packaging	Unit Price	Quantity	Ext. Price
1 ✓ Procurement and processing 		EA	600.00 USD	1 EA	600.00 USD
Delivery Address In California?	Yes	Taxable ✓	Requisition Number	52529274	
Tangible Item?	No	Commodity Code	23	Research/Lab	External Note no note
Vendor outside of California?	No	Supply & Equip			Attachments for supplier
Vendor outside of US?	No	PO Clauses			Internal Note no note
		no clause			Internal Attachments

Shipping, Handling, and Tax charges are calculated and charged by each supplier. The values shown here are for estimation purposes, fund checking, and workflow approvals.

Subtotal	600.00
Sales Tax	0.00
Shipping Only	29.60
Shipping and Handling	0.00
Total	629.60 USD

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Summary - PO 50210307

PO/Reference Number 50210307
Supplier Novogenix Laboratories Llc


General Information		Delivery	Billing
PO/Reference Number	50210307	Deliver To	Bill To
Revision Number	3	Attn: [REDACTED] Room [REDACTED]	USC Accounts Payable [REDACTED]
A/P status	Closed		
Supplier Name	Novogenix Laboratories Llc		
DUNS Address	[REDACTED]		Billing Options
Purchase Order Date	7/29/2014		Contract <i>no value</i>
Original Revision Date	7/29/2014		Payment Terms 0% 30, Net 30
Revision Date	2/3/2015		Place Invoice on <input checked="" type="checkbox"/> Hold
Distribution Date/Time	7/29/2014 3:06 PM		Check Routing <i>no value</i>
Total	1,000.00 USD		
Requisition Number	52449061		
Business Purpose	Tissue engineering		
Previous PO Number	<i>no value</i>		
Contact Information			
Owner Name	[REDACTED]		
Owner Phone	[REDACTED]		
Owner Email	[REDACTED]		
Campus			
HSC			
Additional Information	Capital Asset Management	Facilities	

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FOB	FOB USC	Capital Asset	no value		Facilities	
Payment Term	no value	System Type			Crew Number	Work Order Number
Exception		Capital Asset	no value			
Payment Term	Standard	System State			no value	no value
PO Clauses		Equipment	no value			
no clause		Notes				
CA Income Tax	7%				Stock Number	no value
Withholding Percentage		Capital Asset	Asset #	Trade In Value		
Buyer Review	x	Transaction Type				
			no value	no value	no value	
Buyer Name	Buyer Email	Buyer Phone				
Department	See below	See below				
Contact						

Accounting Codes

Account Number	Validation Code	Object Code	Fiscal Year
			2015
Reprogramming human epidermal and derma	51 52 53 54 55 56 57 58 CP ALL	M&S LABORATORY EXPENSE	

External Notes and Attachments	Internal Notes and Attachments	Distribution Information
Note to Supplier no note Attachments for supplier Novogenix app res... (34k) Novogenix custome... (253k) Novogenix Investi... (50k) Novogenix Investi... (16k)	Internal Note no note Internal Attachments AGP user certific... (52k) Serology waiver l... (61k)	Distribution Methods The system will distribute purchase orders using the method(s) indicated below: Fax 

Line Item Details

Product Description	Catalog No	Size / Packaging	Unit Price	Quantity	Ext. Price
1 ✓ Human tissue 		EA	1,000.00 USD	1 EA	1,000.00 USD
	Taxable	x		Requisition Number	52449061
	Commodity Code	23		External Note	no note
		Research/Lab Supply & Equip		Attachments for supplier	
	PO Clauses				

Summary - PO 50245699

PO/Reference Number 50245699
Supplier Novogenix Laboratories LLC

General Information	Delivery	Billing
PO/Reference Number 50245699	Deliver To	Bill To
Revision Number 1	Attn: [REDACTED]	USC Accounts Payable
A/P status Closed	Room [REDACTED]	[REDACTED]
Supplier Name Novogenix Laboratories LLC	[REDACTED]	
DUNS Address [REDACTED]		Billing Options
Purchase Order Date 11/6/2014		Contract no value
Original Revision Date 11/6/2014		Payment Terms 0% 30, Net 30
Revision Date 11/12/2014		Place Invoice on <input checked="" type="checkbox"/> Hold
Total 2,100.00 USD		Check Routing no value
Requisition Number 56035082		
Business Purpose Payment for past due invoice for [REDACTED] research project		
Previous PO Number no value		
Contact Information		
Owner Name [REDACTED]		
Owner Phone [REDACTED]		
Owner Email [REDACTED]		
Campus		
HSC		
Additional Information	Capital Asset Management	Facilities
[REDACTED]		

FOB	FOB USC	Capital Asset	no value		Facilities
Payment Term	no value	System Type			
Exception		Capital Asset	no value		
Payment Term	Standard	System State			
PO Clauses		Equipment	no value		
no clause		Notes			
CA Income Tax	7%				Stock Number
Withholding		Capital	Asset #	Trade In	
Percentage		Asset		Value	
Buyer Review	x	Transaction			
		Type			
			no value	no value	no value
Buyer Name	Buyer Email	Buyer Phone			
Department	See below	See below			
Contact					

Accounting Codes

Account Number	Validation Code	Object Code	Fiscal Year
[REDACTED]			2015
Latent HIV - Targets and Tools	51 52 53 54 55 56 57 58 CSL ALL	M&S LABORATORY EXPENSE	

External Notes and Attachments	Internal Notes and Attachments	Distribution Information
Note to Supplier no note Attachments for supplier 10_28_2014 (138) ... (423k)	Internal Note no note Internal Attachments	Distribution Methods The system will distribute purchase orders using the method(s) indicated below: Fax [REDACTED] <input checked="" type="checkbox"/> Distribution options have been overridden for this PO

Line Item Details

Product Description	Catalog No	Size / Packaging	Unit Price	Quantity	Ext. Price
1 ✓ Procurement and processing		EA	2,100.00 USD	1 EA	2,100.00 USD
Delivery Address In California?	Yes	Taxable	x	Requisition Number	56035082
Tangible Item?	No	Commodity Code	24	External Note	no note
Vendor outside of	No	Research/Lab Services		Attachments for supplier	

California?

PO Clauses

Internal Note *no note*

Vendor outside of US?

No

no clause

Internal Attachments

Shipping, Handling, and Tax charges are calculated and charged by each supplier. The values shown here are for estimation purposes, fund checking, and workflow approvals.

Subtotal	2,100.00
Sales Tax	0.00
Shipping Only	0.00
Shipping and Handling	0.00
Total	2,100.00 USD

Summary - PO 50247826

PO/Reference Number 50247826
Supplier Novogenix Laboratories Llc

General Information		Delivery	Billing	
PO/Reference Number	50247826	Deliver To	Bill To	
Revision Number	1	Attn: [REDACTED]	USC Accounts Payable	
A/P status	Closed	Room [REDACTED]		
Supplier Name	Novogenix Laboratories Llc	[REDACTED]		
DUNS Address	[REDACTED]		Billing Options	
Purchase Order Date	11/13/2014		Contract	no value
Original Revision Date	11/13/2014		Payment Terms	0% 30, Net 30
Revision Date	12/8/2014		Place Invoice on	<input checked="" type="checkbox"/>
Total	229.60 USD		Hold	
Requisition Number	56230110		Check Routing	no value
Business Purpose	DNA Sequencing			
Previous PO Number	no value			
Contact Information				
Owner Name	[REDACTED]			
Owner Phone	[REDACTED]			
Owner Email	[REDACTED]			
Campus				
HSC				
Additional Information		Capital Asset Management	Facilities	
FOB	FOB USC	Capital Asset System Type	Facilities	
		no value	Crew Number	Work Order

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Number


Payment Term Exception	no value	Capital Asset System State	no value		
Payment Term	Standard	Equipment Notes	no value	no value	no value
PO Clauses	no clause				Stock Number no value
CA Income Tax Withholding Percentage	7%	Capital Asset Transaction Type	Asset #	Trade In Value	
Buyer Review	x		no value	no value	no value
Buyer Name	Buyer Email	Buyer Phone			
Department Contact	See below	See below			

Accounting Codes

Account Number	Validation Code	Object Code	Fiscal Year
[REDACTED]	[REDACTED]	[REDACTED]	2015
Evaluation of Cellular Heterogeneity Us	51 52 53 54 55 56 57 58 CG ALL	GENERAL/PROJECT SUPPLIES	

External Notes and Attachments	Internal Notes and Attachments	Distribution Information
Note to Supplier no note	Internal Note no note	Distribution Methods
Attachments for supplier	Internal Attachments	The system will distribute purchase orders using the method(s) indicated below:
		Fax [REDACTED]
		<input checked="" type="checkbox"/> Distribution options have been overridden for this PO

Line Item Details

Product Description	Catalog No	Size / Packaging	Unit Price	Quantity	Ext. Price
1 ✓ Procurement and processing BN, EDA: 9.0 		EA	200.00 USD	1 EA	200.00 USD
Delivery Address In California?	Yes	Taxable	✓	Requisition Number	56230110
Tangible Item?	No	Commodity Code	23	External Note	no note
Vendor outside of California?	No	Supply & Equip		Attachments for supplier	
		PO Clauses		Internal Note	no note

Vendor outside of US?

No *no clause*

Internal Attachments

Shipping, Handling, and Tax charges are calculated and charged by each supplier. The values shown here are for estimation purposes, fund checking, and workflow approvals.

Subtotal	200.00
Sales Tax	0.00
Shipping Only	29.60
Shipping and Handling	0.00
Total	229.60 USD

Summary - PO 50218307

PO/Reference Number 50218307
Supplier Novogenix Laboratories Llc

General Information		Delivery	Billing
PO/Reference Number	50218307	Deliver To	Bill To
Revision Number	1	Attn: [REDACTED] Room [REDACTED]	USC Accounts Payable [REDACTED]
A/P status	Closed		
Supplier Name	Novogenix Laboratories Llc		
DUNS Address	[REDACTED]		Billing Options Contract <i>no value</i> Payment Terms 0% 30, Net 30 Place Invoice on <input checked="" type="checkbox"/> Hold Check Routing <i>no value</i>
Purchase Order Date	8/20/2014		
Original Revision Date	8/20/2014		
Revision Date	9/18/2014		
Total	630.40 USD		
Requisition Number	53429467		
Business Purpose	Research Supplies		
Previous PO Number	<i>no value</i>		
Contact Information			
Owner Name	[REDACTED]		
Owner Phone	[REDACTED]		
Owner Email	[REDACTED]		
Campus			
HSC			
Additional Information		Capital Asset Management	Facilities
FOB	FOB USC	Capital Asset System Type <i>no value</i>	Facilities Crew Number Work Order

Payment Term Exception	<i>no value</i>	Capital Asset System State	<i>no value</i>	Number	
Payment Term	Standard	Equipment Notes	<i>no value</i>	<i>no value</i>	<i>no value</i>
PO Clauses	<i>no clause</i>			Stock Number	<i>no value</i>
CA Income Tax Withholding Percentage	7%	Capital Asset Transaction Type	Asset #	Trade In Value	
Buyer Review	x	<i>no value</i>	<i>no value</i>	<i>no value</i>	
Buyer Name	Buyer Email	Buyer Phone			
Department Contact	See below	See below			

Accounting Codes

Account Number	Validation Code	Object Code	Fiscal Year
			2015
Evaluation of Cellular Heterogeneity Us	51 52 53 54 55 56 57 58 CG ALL	M&S LABORATORY EXPENSE	

External Notes and Attachments

Note to Supplier *no note*
Attachments for supplier

Internal Notes and Attachments


Internal Note *no note*
Internal Attachments

Distribution Information


Distribution Methods

The system will distribute purchase orders using the method(s) indicated below:

Fax

 Distribution options have been overridden for this PO

Line Item Details

Product Description	Catalog No	Size / Packaging	Unit Price	Quantity	Ext. Price
1 <input checked="" type="checkbox"/> Procurement and processing 		EA	200.00 USD	3 EA	600.00 USD
Delivery Address In California?	Yes	Taxable <input checked="" type="checkbox"/>	Requisition Number	53429467	
Tangible Item?	No	Commodity Code	23	Research/Lab Supply & Equip	External Note <i>no note</i>
Vendor outside of California?	No	PO Clauses			Attachments for supplier
Vendor outside of US?	No	<i>no clause</i>			Internal Note <i>no note</i>
					Internal Attachments

Shipping, Handling, and Tax charges are calculated and charged by each supplier. The values shown here are for estimation purposes, fund checking, and workflow approvals.

Subtotal	600.00
Sales Tax	0.00
Shipping Only	30.40
Shipping and Handling	0.00
Total	630.40 USD

Summary - PO 50218851

PO/Reference Number 50218851
 Supplier Novogenix Laboratories LLC

General Information		Delivery	Billing	
PO/Reference Number	50218851	Deliver To	Bill To	
Revision Number	1	Attn: [REDACTED]	USC Accounts Payable	
A/P status	Closed	Room [REDACTED]		
Supplier Name	Novogenix Laboratories LLC			
DUNS Address	[REDACTED]		Billing Options	
Purchase Order Date	8/21/2014		Contract	<i>no value</i>
Original Revision Date	8/21/2014		Payment Terms	0% 30, Net 30
Revision Date	8/25/2014		Place Invoice on	<input checked="" type="checkbox"/>
Total	350.00 USD		Hold	
Requisition Number	53478892		Check Routing	<i>no value</i>
Business Purpose	lab supplies			
Previous PO Number	<i>no value</i>			
Contact Information				
Owner Name	[REDACTED]			
Owner Phone	[REDACTED]			
Owner Email	[REDACTED]			
Campus				
HSC				
Additional Information		Capital Asset Management	Facilities	
FOB	FOB USC	Capital Asset System Type	Facilities	
		<i>no value</i>	Crew Number	Work Order

no clause

Internal Attachments

Shipping, Handling, and Tax charges are calculated and charged by each supplier. The values shown here are for estimation purposes, fund checking, and workflow approvals.

Subtotal	350.00
Sales Tax	0.00
Shipping Only	0.00
Shipping and Handling	0.00
Total	350.00 USD

Summary - PO 50231923

PO/Reference Number 50231923
Supplier Novogenix Laboratories Llc

General Information		Delivery	Billing	
PO/Reference Number	50231923	Deliver To	Bill To	
Revision Number	1	Attn: [REDACTED] Room [REDACTED]	USC Accounts Payable	[REDACTED]
A/P status	Closed			
Supplier Name	Novogenix Laboratories Llc			
DUNS Address	[REDACTED]		Billing Options	
Purchase Order Date	9/29/2014		Contract	no value
Original Revision Date	9/29/2014		Payment Terms	0% 30, Net 30
Revision Date	4/27/2015		Place Invoice on	<input checked="" type="checkbox"/> Hold
Total	431.20 USD		Check Routing	no value
Requisition Number	54704851			
Business Purpose	Research Supplies			
Previous PO Number	no value			
Contact Information				
Owner Name	[REDACTED]			
Owner Phone	[REDACTED]			
Owner Email	[REDACTED]			
Campus	HSC			
Additional Information		Capital Asset Management	Facilities	
FOB	FOB USC	Capital Asset System Type	Facilities	
		no value	Crew Number	Work Order

Payment Term Exception	no value	Capital Asset System State	no value	Number	
Payment Term	Standard	Equipment Notes	no value	no value	no value
PO Clauses	no clause			Stock Number	no value
CA Income Tax Withholding Percentage	7%	Capital Asset Transaction Type	Asset #	Trade In Value	
Buyer Review	x	no value	no value	no value	
Buyer Name	Buyer Email	Buyer Phone			
Department Contact	See below	See below			

Accounting Codes

Account Number	Validation Code	Object Code	Fiscal Year
Evaluation of Cellular Heterogeneity Us	51 52 53 54 55 56 57 58 CG ALL	M&S LABORATORY EXPENSE	2015

External Notes and Attachments	Internal Notes and Attachments	Distribution Information
Note to Supplier no note	Internal Note no note	Distribution Methods
Attachments for supplier	Internal Attachments	The system will distribute purchase orders using the method(s) indicated below:
		Fax [REDACTED]
		<input checked="" type="checkbox"/> Distribution options have been overridden for this PO

Line Item Details

Product Description	Catalog No	Size / Packaging	Unit Price	Quantity	Ext. Price
1 ✓ Procurement & processing 51603-19.3-1		EA	200.00 USD	1 EA	200.00 USD
Delivery Address In California?	Yes	Taxable	✓	Requisition Number	54704851
Tangible Item?	No	Commodity Code	24	External Note	no note
Vendor outside of California?	No	Services	Research/Lab	Attachments for supplier	
		PO Clauses		Internal Note	no note

Vendor outside of US?

No *no clause*

Internal Attachments

2 ✓ Procurement & processing 68316-19.3-

EA

200.00 USD

1 EA

200.00 USD

1 Delivery Address In
California?

Yes

Taxable

✓

Requisition 54704851
Number

Tangible Item?

No

Commodity

24

External Note *no note*Vendor outside of
California?

No

Code

Research/Lab

Attachments for supplier

Vendor outside of US?

No

PO Clauses

Internal Note *no note**no clause*

Internal Attachments

Shipping, Handling, and Tax charges are calculated and charged by each supplier.
The values shown here are for estimation purposes, fund checking, and workflow
approvals.

Subtotal **400.00**

Sales Tax 0.00

Shipping Only 31.20

Shipping and 0.00
HandlingTotal **431.20 USD**

Summary - PO 50231924

PO/Reference Number 50231924
 Supplier Novogenix Laboratories Llc

General Information		Delivery	Billing	
PO/Reference Number	50231924	Deliver To	Bill To	
Revision Number	1	Attn: [REDACTED] Room [REDACTED]	USC Accounts Payable	[REDACTED]
A/P status	Closed			
Supplier Name	Novogenix Laboratories Llc			
DUNS Address	[REDACTED]		Billing Options	
Purchase Order Date	9/29/2014		Contract	no value
Original Revision Date	9/29/2014		Payment Terms	0% 30, Net 30
Revision Date	10/10/2014		Place Invoice on	X
Total	231.20 USD		Hold	
Requisition Number	54704851		Check Routing	no value
Business Purpose	Research Supplies			
Previous PO Number	no value			
Contact Information				
Owner Name	[REDACTED]			
Owner Phone	[REDACTED]			
Owner Email	[REDACTED]			
Campus				
HSC				
Additional Information		Capital Asset Management	Facilities	
FOB	FOB USC	Capital Asset System Type	Facilities	
		no value	Crew Number	Work Order
[REDACTED]				

Payment Term Exception	no value	Capital Asset System State	no value	Number	
Payment Term	Standard	Equipment Notes	no value	no value	no value
PO Clauses	no clause			Stock Number	no value
CA Income Tax Withholding Percentage	7%	Capital Asset Transaction Type	Asset #	Trade In Value	
Buyer Review	x	no value	no value	no value	
Buyer Name	Buyer Email	Buyer Phone			
Department Contact	See below	See below			

Accounting Codes

Account Number	Validation Code	Object Code	Fiscal Year
			2015
Evaluation of Cellular Heterogeneity Us	51 52 53 54 55 56 57 58 CG ALL	M&S LABORATORY EXPENSE	

External Notes and Attachments	Internal Notes and Attachments	Distribution Information
Note to Supplier no note Attachments for supplier	Internal Note no note Internal Attachments	Distribution Methods The system will distribute purchase orders using the method(s) indicated below: Fax [REDACTED] <input checked="" type="checkbox"/> Distribution options have been overridden for this PO

Line Item Details

Product Description	Catalog No	Size / Packaging	Unit Price	Quantity	Ext. Price
1 ✓ Procurement & processing 66906-2.14-1		EA	200.00 USD	1 EA	200.00 USD
Delivery Address In California?	Yes	Taxable	✓	Requisition Number	54704851
Tangible Item?	No	Commodity Code	24	External Note	no note
Vendor outside of California?	No	Research/Lab Services		Attachments for supplier	
		PO Clauses		Internal Note	no note

Vendor outside of US?

No *no clause*

Internal Attachments

59

Shipping, Handling, and Tax charges are calculated and charged by each supplier.
The values shown here are for estimation purposes, fund checking, and workflow approvals.

Subtotal	200.00
Sales Tax	0.00
Shipping Only	31.20
Shipping and Handling	0.00
Total	231.20 USD

58

Summary - PO 50235476

PO/Reference Number 50235476
Supplier Novogenix Laboratories Llc

General Information		Delivery	Billing
PO/Reference Number	50235476	Deliver To	Bill To
Revision Number	1	Attn: [REDACTED] Room [REDACTED]	USC Accounts Payable [REDACTED]
A/P status	Closed		
Supplier Name	Novogenix Laboratories Llc		
DUNS Address	[REDACTED]		Billing Options Contract <i>no value</i> Payment Terms 0% 30, Net 30 Place Invoice on <input checked="" type="checkbox"/> Hold Check Routing <i>no value</i>
Purchase Order Date	10/9/2014		
Original Revision Date	10/9/2014		
Revision Date	10/17/2014		
Total	231.20 USD		
Requisition Number	55073391		
Business Purpose	DNA Sequencing/Lab Reagents		
Previous PO Number	<i>no value</i>		
Contact Information Owner Name [REDACTED] Owner Phone [REDACTED] Owner Email [REDACTED] Campus HSC			
Additional Information FOB FOB USC		Capital Asset Management Capital Asset <i>no value</i>	Facilities Facilities

58

Payment Term	no value	System Type		Crew Number	Work Order Number
Exception		Capital Asset	no value		
Payment Term	Standard	System State		no value	no value
PO Clauses	no clause	Equipment Notes	no value		
CA Income Tax	7%			Stock Number	no value
Withholding Percentage		Capital Asset Transaction Type	Asset #	Trade In Value	
Buyer Review	X		no value	no value	no value
Buyer Name	Buyer Email	Buyer Phone			
Department Contact	See below	See below			

Accounting Codes

Account Number	Validation Code	Object Code	Fiscal Year
			2015
Evaluation of Cellular Heterogeneity Us	51 52 53 54 55 56 57 58 CG ALL	M&S LABORATORY EXPENSE	

External Notes and Attachments	Internal Notes and Attachments	Distribution Information
Note to Supplier no note Attachments for supplier	Internal Note no note Internal Attachments	Distribution Methods The system will distribute purchase orders using the method(s) indicated below: Fax [REDACTED] <input checked="" type="checkbox"/> Distribution options have been overridden for this PO

Line Item Details

Product Description	Catalog No	Size / Packaging	Unit Price	Quantity	Ext. Price
1 ✓ Procurement and processing <input checked="" type="checkbox"/>		EA	200.00 USD	1 EA	200.00 USD
Delivery Address In California?	Yes	Taxable	✓	Requisition Number	55073391
Tangible Item?	No	Commodity Code	23	External Note	no note
Vendor outside of California?	No	Supply & Equip		Attachments for supplier	
		PO Clauses			

Vendor outside of US?

No ! *no clause*Internal Note *no note*

Internal Attachments

Shipping, Handling, and Tax charges are calculated and charged by each supplier.
The values shown here are for estimation purposes, fund checking, and workflow approvals.

Subtotal	200.00
Sales Tax	0.00
Shipping Only	31.20
Shipping and Handling	0.00
Total	231.20 USD

Summary - PO 50235479

PO/Reference Number 50235479

Supplier Novogenix Laboratories LLC

General Information	Delivery	Billing
PO/Reference Number 50235479	Deliver To	Bill To
Revision Number 1	Attn: [REDACTED]	USC Accounts Payable
A/P status Closed	Room [REDACTED]	[REDACTED]
Supplier Name Novogenix Laboratories LLC		
DUNS Address [REDACTED]		Billing Options
Purchase Order Date 10/9/2014		Contract no value
Original Revision Date 10/9/2014		Payment Terms 0% 30, Net 30
Revision Date 10/20/2014		Place Invoice on <input checked="" type="checkbox"/>
Total 431.20 USD		Hold
Requisition Number 55073734		Check Routing no value
Business Purpose DNA Sequencing/Lab Reagents		
Previous PO Number no value		
Contact Information		
Owner Name [REDACTED]		
Owner Phone [REDACTED]		
Owner Email [REDACTED]		
Campus		
HSC		
Additional Information	Capital Asset Management	Facilities
FOB FOB USC	Capital Asset no value	Facilities

Payment Term	<i>no value</i>		System Type			Crew Number	Work Order Number
Exception			Capital Asset	<i>no value</i>			
Payment Term	Standard		System State			<i>no value</i>	<i>no value</i>
PO Clauses	<i>no clause</i>		Equipment Notes	<i>no value</i>			
CA Income Tax	7%					Stock Number	<i>no value</i>
Withholding Percentage			Capital Asset	Asset #	Trade In Value		
Buyer Review	x		Transaction Type				
Buyer Name	Buyer Email	Buyer Phone	<i>no value</i>	<i>no value</i>	<i>no value</i>		
Department Contact	See below	See below					

Accounting Codes

Account Number	Validation Code	Object Code	Fiscal Year
----------------	-----------------	-------------	-------------

			2015
Evaluation of Cellular Heterogeneity Us	51 52 53 54 55 56 57 58 CG ALL	M&S LABORATORY EXPENSE	

External Notes and Attachments

Note to Supplier *no note*
Attachments for supplier

Internal Notes and Attachments


Internal Note *no note*
Internal Attachments

Distribution Information


Distribution Methods

The system will distribute purchase orders using the method(s) indicated below:

Fax

 Distribution options have been overridden for this PO

Line Item Details

Product Description	Catalog No	Size / Packaging	Unit Price	Quantity	Ext. Price
1 <input checked="" type="checkbox"/> Procurement and processing 		EA	200.00 USD	2 EA	400.00 USD
Delivery Address In California?	Yes	Taxable <input checked="" type="checkbox"/>	Requisition Number	55073734	
Tangible Item?	No	Commodity Code	23	Research/Lab	External Note <i>no note</i>
Vendor outside of California?	No	Supply & Equip			Attachments for supplier
		PO Clauses			

Vendor outside of US?

No *no clause*Internal Note *no note*

Internal Attachments

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Shipping, Handling, and Tax charges are calculated and charged by each supplier. The values shown here are for estimation purposes, fund checking, and workflow approvals.

Subtotal	400.00
Sales Tax	0.00
Shipping Only	31.20
Shipping and Handling	0.00
Total	431.20 USD

Summary - PO 50241784

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PO/Reference Number 50241784

Supplier Novogenix Laboratories LLC

General Information		Delivery	Billing
PO/Reference Number	50241784	Deliver To	Bill To
Revision Number	3	Attn: [REDACTED]	USC Accounts Payable
A/P status	Closed	Room [REDACTED]	[REDACTED]
Supplier Name	Novogenix Laboratories LLC		
DUNS Address	[REDACTED]		
Purchase Order Date	10/27/2014		Billing Options
Original Revision Date	10/27/2014		Contract no value
Revision Date	5/6/2015		Payment Terms 0% 30, Net 30
Distribution Date/Time	10/27/2014 3:19 PM		Place Invoice on <input checked="" type="checkbox"/> Hold
Total	1,000.00 USD		Check Routing no value
Requisition Number	55447023		
Business Purpose	Human tissues		
Previous PO Number	no value		
Contact Information			
Owner Name	[REDACTED]		
Owner Phone	[REDACTED]		
Owner Email	[REDACTED]		
Campus			
HSC			
Additional Information	Capital Asset Management	Facilities	

FOB	FOB USC	Capital Asset	no value		Facilities	54		
Payment Term Exception	no value	System Type					Crew Number	Work Order Number
Payment Term	Standard	Capital Asset	no value					
PO Clauses		System State					no value	no value
		Equipment Notes	no value					
CA Income Tax	7%				Stock Number	no value		
Withholding Percentage		Capital Asset Transaction Type	Asset #	Trade In Value				
Buyer Review	x							
Buyer Name	Buyer Email	Buyer Phone	no value	no value				
Department Contact	See below	See below						

Accounting Codes

Account Number	Validation Code	Object Code	Fiscal Year
[REDACTED]	51 52 53 54 55 56 57 58 CP ALL	M&S LABORATORY EXPENSE	2015
Reprogramming human epidermal and derma			

External Notes and Attachments	Internal Notes and Attachments	Distribution Information
Note to Supplier no note Attachments for supplier Customer Agreement (253k) Investigator Info... (50k) Investigator Stat... (16k) App research syno... (34k)	Internal Note no note Internal Attachments Serology waiver l... (61k) AGP User certific... (52k)	Distribution Methods The system will distribute purchase orders using the method(s) indicated below: Fax [REDACTED]

Line Item Details

Product Description	Catalog No	Size / Packaging	Unit Price	Quantity	Ext. Price
1 ✓ Human Tissue		EA	1,000.00 USD	1 EA	1,000.00 USD
	Taxable	x	Requisition Number	55447023	
	Commodity Code	23 Research/Lab Supply & Equip	External Note	no note	
	PO Clauses		Attachments for supplier		

*no clause*Internal Note *no note*

Internal Attachments

54

Shipping, Handling, and Tax charges are calculated and charged by each supplier. The values shown here are for estimation purposes, fund checking, and workflow approvals.

Subtotal	1,000.00
Sales Tax	0.00
Shipping Only	0.00
Shipping and Handling	0.00
Total	1,000.00 USD

Payment Term Exception	no value	Capital Asset System State	no value		
Payment Term	Standard	Equipment Notes	no value	no value	no value
PO Clauses	no clause				
CA Income Tax Withholding Percentage	7%	Capital Asset Transaction Type	Asset #	Trade In Value	
Buyer Review	x	no value	no value	no value	
Buyer Name	Buyer Email	Buyer Phone			
Department Contact	See below	See below			

Accounting Codes

Account Number	Validation Code	Object Code	Fiscal Year
Peripheral TGF-beta Pathway Inhibitor T	51 52 53 54 55 56 57 58 CG ALL	M&S LABORATORY EXPENSE	2015

External Notes and Attachments	Internal Notes and Attachments	Distribution Information
Note to Supplier no note Attachments for supplier	Internal Note no note Internal Attachments	Distribution Methods The system will distribute purchase orders using the method(s) indicated below: Fax [REDACTED] <input checked="" type="checkbox"/> Distribution options have been overridden for this PO

Line Item Details



Product Description	Catalog No	Size / Packaging	Unit Price	Quantity	Ext. Price
1. ✓ 1 Procurement and Processing-FL. EDA: 14:6 		EA	350.00 USD	1 EA	350.00 USD
Delivery Address In California?	Yes	Taxable	✓	Requisition Number	53478892
Vendor outside of California?	No	Commodity Code	23	External Note	no note
Vendor outside of US?	No	PO Clauses	Research/Lab Supply & Equip	Attachments for supplier	
				Internal Note	no note

Exhibit 5.4.1

CunninghamLevy.

Cunningham Levy LLP
1250 Connecticut Ave NW, Suite 200
Washington, DC 20036




September 2, 2015

via Hand Delivery

Charles Ingebretson
Chief Counsel
House Committee on Energy and Commerce
2125 Rayburn House Office Building
Washington, DC 20515-6115

Re: Novogenix Laboratories LLC

Dear Charles:

Through this letter, on behalf of our client Novogenix Laboratories LLC ("Novogenix"), we are voluntarily transmitting documents, per your request, in advance of our briefing tomorrow morning with the House Committee on Energy and Commerce majority and minority staff, and staff from other committee members' offices. Novogenix continues to cooperate with the committee's inquiry, and the company will be producing its Executive Director Dr.  for an in-person briefing, tomorrow morning.

Nothing in this letter shall be misconstrued as an admission by the company or a waiver of its rights or privileges.

Overview of Novogenix Laboratories LLC

Dr. [REDACTED] founded Novogenix Laboratories LLC ("Novogenix") in February 2010, and he is its Executive Director. Novogenix did not begin collecting and processing tissues or stem cells therefrom, however, until August 2011. Between February 2010 and July 2011, Novogenix focused almost exclusively on training.

Purpose – Scientific Research Only: Novogenix's work with fetal tissue and stem cells derived therefrom was exclusively for the purpose of scientific research, and was not used for therapeutic or transplantation purposes.¹ Novogenix has had contracts with roughly 100 clients, 98% of whom are academic scientific researchers.

No Profit: In each fiscal year, from Fiscal Years 2011 through the present, Novogenix has yielded a loss for its work related to fetal tissue and stem cells therefrom, as follows:

<u>FY 2011:</u>	-\$19,184.86
<u>FY 2012:</u>	-\$68,911.76
<u>FY 2013:</u>	-\$30,772.02
<u>FY 2014:</u>	-\$40,250.34
<u>FY 2015:</u>	-\$1,421.05 (to date) ²

In an abundance of caution, Dr. [REDACTED] a Ph.D. in Molecular, Cell and Developmental Biology, intended for Novogenix not to profit from transactions for services related to the use of fetal tissue and stem cells derived therefrom.³ The hope was

¹ The template for the contract that Novogenix enters into with its clients is attached at **Exhibit A**.

² A detailed accounting for FY2011 – FY2015 (through July 2015) is attached at **Exhibit B**. Counsel created this document, based on contemporaneous data and documentation, and any errors therein are counsel's, not the client's.

³ A description of the costs that the company expends to perform the services it renders is attached at **Exhibit C**. Although counsel created this document, and any errors therein are counsel's, not the client's, the document is based on contemporaneous documentation and data. In the exhibit, you will see a detailed breakdown of costs for services related to (a) formalin fixed tissue and (b) non-formalin fixed tissue. The cost of those services is roughly \$50-\$51 per specimen, which, in FY2011, Novogenix calculated and then increased the costs of services rendered per specimen by roughly an additional \$150/specimen to bring the total charge for services related to each specimen to \$200 per specimen, in most cases. Novogenix added the \$150 to the price of the services in order to account for additional fixed costs amortized over a 12-month period, e.g., employee salaries and lease-payments on the lab. Over time, Novogenix increased the total cost for services per specimen to \$250, in most cases, because Novogenix had erred too strongly,

that Novogenix would ultimately become profitable through the company's other business units, *e.g.*, consulting.

Training: Dr. [REDACTED] is an accomplished Ph.D, who has authored or co-authored over 20 scientific publications, which have been cited over 1,000 times in scientific journals.⁴

He began his own training, under the supervision of his UCLA Ph.D. advisor, [REDACTED], M.D., Ph.D. Since 2005, Dr. [REDACTED] has been a faculty member at the UCLA Department of Molecular, Cell and Developmental Biology/Jonsson Comprehensive Cancer Center.⁵ Under her supervision, Dr. [REDACTED] enrolled in courses at UCLA, on "Bloodborne Pathogens," "Biosafety Training" and "Medical Waste Management," among others. In Dr. [REDACTED]'s library, Dr. [REDACTED] also reviewed relevant textbooks and literature on human developmental biology.

Following that training, Dr. [REDACTED] and Dr. [REDACTED] submitted a proposal to the institutional review board to examine the molecular and cellular mechanisms of regulating human developmental hematopoiesis (*i.e.*, blood formation). The institutional review board approved the proposal. For that proposal, Dr. [REDACTED] and Dr. [REDACTED] worked with the Tissue Processing Core Library ("TPCL"), which obtained consent and collected the donated tissue for Dr. [REDACTED]'s approved research.

Through that application process before the institutional review board, Dr. [REDACTED] was required to review and comply with certain rules and regulations and thus developed an understanding of them. Such subjects included, but were not limited to:

- Anonymity
- Informed consent
- Donation of fetal tissue for scientific research

Under the supervision of Dr. [REDACTED], Dr. [REDACTED] learned from the institutional review board and the professionalism displayed at TPCL the correct and compliant manner of obtaining consent, maintaining anonymity and preserving and preparing tissue for scientific research. Through this process and his prior training at

in the past, on the side of undervaluing the cost of its services. Novogenix also has increased the cost of services it charges to scientists, when additional work is required.

⁴ Dr. [REDACTED]'s CV, including a list of his publications is attached at Exhibit D.

⁵ Her biography is attached at Exhibit E and can also be found here:

[REDACTED] (last visited September 1, 2015).

Letter to Charles Ingebretson
September 1, 2015
Page 4 of 4

UCLA, he also gained familiarity with the USC Environmental Health and Safety guidelines for transporting specimens.⁶

Applying these experiences to Novogenix, Dr. [REDACTED] required that Novogenix staff undergo nine months of training, under his supervision. Novogenix staff spent this time observing at different clinics in the Los Angeles area, and staff enrolled and obtained certificates in relevant courses at USC and other institutions.

PPLA Contract and Consent Form: Novogenix entered into a contract with Planned Parenthood of Los Angeles on March 29, 2010, and a consent form is attached to it.⁷

Sincerely,



Joshua A. Levy
Kathryn J. Wozny
Counsel for Novogenix Laboratories LLC

Enclosures

cc: Yuna Lee
Minority Counsel
House Committee on Energy and Commerce

⁶ These guidelines, as well as other training materials and protocols, are attached at Exhibit F.

⁷ A copy of the contract, attaching a consent form, is attached at Exhibit G.

Exhibit 5.4.2

ONE HUNDRED FOURTEENTH CONGRESS
Congress of the United States
House of Representatives

COMMITTEE ON ENERGY AND COMMERCE

2125 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-6115

Majority (202) 225-2927
Minority (202) 225-3641

December 17, 2015

Dr. [REDACTED]
Executive Director
Novogenix Laboratories, LLC
1425 San Pablo Street, Suite 205
Los Angeles, CA 90033

Dear Dr. [REDACTED]:

We thank you for your earlier production of Novogenix Laboratories, LLC ("Novogenix") materials to the Committee on Energy and Commerce. On October 7, 2015, the U.S. House of Representatives passed H. Res. 461, which created the Select Panel on Infant Lives and empowered the panel to investigate issues related to fetal tissue research. This document request is made pursuant to the scope of investigative responsibility of the panel.

As a result, we are hereby requesting that you produce the following categories of documents and information created or dated on or after January 1, 2010:

- 1) A list of all entities, including firms, corporations, non-profit organizations, and educational institutions, from which Novogenix receives or procures fetal tissue.¹
- 2) A list of all entities, including firms, corporations, non-profit organizations, and educational institutions, to which Novogenix sells or donates fetal tissue.
- 3) A list of all entities, including firms, corporations, non-profit organizations, and educational institutions, to which Novogenix transferred, subcontracted or sold any business interest or business assets related to the procurement or sale of fetal tissue.
- 4) An organization chart that details Novogenix personnel that procure fetal tissue at the clinic level and the supervisory personnel for those procurers of fetal tissue.

¹ Please note that, for the purposes of this request, the term "fetal tissue" includes tissue, organs, body parts, and cell lines.

- 5) All communications, whether internal or external, that direct Novogenix personnel to procure fetal tissue, including, but not limited to memoranda, emails, telephone messages, and purchase orders or bills of sale.
- 6) All accounting records including accounting memoranda related to the cost and pricing of fetal tissue.
- 7) All specific requests made to Novogenix for fetal tissue made by any and all firms, corporations, non-profit organizations, educational institutions, or other entities, including, but not limited to, order lists, billing records, payment records, payment vouchers, and receipts.
- 8) All documents relating to the purchase, ownership, or rental by Novogenix of equipment involving fetal tissue research, the preparation of fetal tissue for research, the modification of fetal tissue into cell lines, or any other actions taken by Novogenix related to fetal tissue including, but not limited to, the date the equipment was purchased, its purchase price, its maintenance costs, and records of the depreciation treatment under the tax code of any such equipment.
- 9) An inventory record of all fetal tissues obtained, sold, or retained by Novogenix, as well as an inventory of current fetal tissue including, in particular, any records that refer to multiple tissue samples or organs or body parts harvested from a single fetus.
- 10) All records related to any fetal tissue or cell lines procured or sold from twin fetuses.
- 11) All documents relating to rent or site fees paid to entities from which Novogenix obtained, sold, or donated fetal tissue.
- 12) All training materials used by Novogenix for the procurement of fetal tissue, preparation of fetal tissue, storage of fetal tissue, and training materials or guidance documents related to Novogenix staff relations with personnel or patients at the source entities from which fetal tissue is procured.
- 13) All Novogenix banking records related to the procurement, sale, donation, or distribution or shipment of fetal tissue.

Please produce the requested documents by the close of business on December 29, 2015. Instructions for responding to the Select Panel's document requests are included as an attachment to this letter.

If you have any questions about this request, please contact Matthew Tallmer of the Select Panel Staff at (202) [REDACTED], or by email at [REDACTED].

Sincerely,

A handwritten signature in black ink, reading "Marsha Blackburn". The signature is fluid and cursive, with the first name "Marsha" and last name "Blackburn" clearly distinguishable.

Marsha Blackburn

Chair

Select Panel on Infant Lives

Attachment(s)

cc: The Honorable Jan Schakowsky, Ranking Member
Select Panel on Infant Lives

Exhibit 5.4.3

December 22, 2015

via Electronic Mail

Matthew Tallmer
[REDACTED]

Re: Novogenix Laboratories, LLC

Dear Matt:

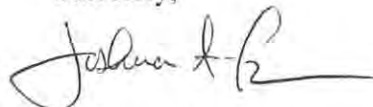
On behalf of Novogenix Laboratories, LLC ("Novogenix") and its Executive Director, [REDACTED] M.D., Ph.D, this letter is in furtherance of our phone calls on December 21 and 22, 2015, and in response to Chairwoman Blackburn's letter, which we received in full on December 18, 2015 ("the December 18 letter"). Nothing in this letter shall be misconstrued as either an admission by Novogenix or a waiver of its privileges.

1. Novogenix has cooperated with two previous congressional inquiries regarding the items requested in the December 18 letter, in which staff acknowledged and thanked Novogenix for its production to the House Committee on Energy and Commerce.
2. Due in large part to the costs born from having to respond to these congressional inquiries, our client is no longer doing business. It has come to the end of the line in terms of resources.
3. Novogenix already has made two productions to the House Committee on Energy and Commerce and its Subcommittee on Oversight and Investigations, and Dr. [REDACTED] flew from California to Washington, D.C., to sit with nearly a dozen committee staff members and answer questions for as long as they wanted.
4. The documents and information that Novogenix already has provided to the House Committee on Energy and Commerce are responsive to what appears to be the gravamen of the requests enumerated in the December 18 letter.
5. Through the December 18 letter, the Select Panel requested that our client respond to 13 broad requests for information and documents, no later than December 29, 2015. The Select Panel thus provided us with less than seven business days within which to complete this production. Even if our

Even if our client had the resources, timely production would be impossible immediately during the period of time between Christmas and New Year's Day, as counsel will be out of town for the rest of December. Counsel will not be able to respond to the December 18 letter by December 29.

6. Additionally, we called you yesterday to introduce ourselves and request a copy of the newly created Select Panel's rules. (Neither the U.S House of Representatives nor the House Committee on Energy and Commerce has created a web site for the Select Panel.) Yesterday, you provided us a copy of House Resolution 461 and represented that it sets forth the rules for the Select Panel. That said, the Select Panel has not yet convened an initial executive session, in which additional rules may be discussed and passed.
7. Novogenix has been cooperative with past congressional investigations, including one held by the full committee under which the Select Panel sits. Novogenix is no longer in business.¹ For those reasons, Novogenix should not be burdened with additional broad requests for production of documents and information. That said, Novogenix wants to continue to be cooperative with any reasonable requests, and, in that vein, we will speak with you in early January, as agreed, to better understand what the Select Panel seeks to learn, after you have had a chance to review Novogenix's past productions and responses to congressional inquiries on this matter.²

Sincerely,



Joshua A. Levy

cc: March Bell
Majority Staff Director

Heather Sawyer
Minority Staff Director

¹ On our call today, you asked if there was a successor in interest to Novogenix, and we agreed to provide that answer to you in January.

² On our call today, you asked that we provide you, after the holidays, with Novogenix's productions to the Senate Judiciary Committee and the House Committee on Energy and Commerce.

Exhibit 5.4.4

February 16, 2016

via Electronic Mail

CONFIDENTIAL – HIGHLY SENSITIVE INFORMATION

Matthew Tallmer
[REDACTED]

Re: Novogenix Laboratories, LLC

Dear Matt:

Through this letter, and in furtherance of our letter of January 19, 2016, the undersigned counsel for Novogenix Laboratories LLC (“Novogenix”) responds to Request No. 2 of the December 18, 2015, letter from the Select Panel, as modified in our email correspondence of January 19, 2016 (attached).¹ Nothing in this letter shall constitute a waiver of any of Novogenix’s privileges or rights.

2. A list of all entities, including firms, corporations, non-profit organizations, and educational institutions, to which Novogenix sells or donates fetal tissue.

a. Novogenix has not sold fetal tissue. Rather, Novogenix contracted with a number of scientists to be reimbursed for the costs of services performed by Novogenix, and each of those contracts includes a non-disclosure agreement. In January, we expressed our reservations about disclosing even the names of the institutions with which these scientists were affiliated at the time of the contract, due, in large part, to concerns about the safety of the individuals working there. In the interest of cooperating with the Select Panel, we have been working with dispatch to reach out to these entities in order to determine whether any of them would consent to our disclosure of their names to the Select Panel. Such a process has been necessary not only out of consideration for the well being of the people working at these entities, but also out of respect for the non-disclosure agreements in place.

¹ Your January 19, 2016, email indicated February 15, 2016, as the date by which you wanted to receive our response. Since yesterday (February 15) was a federal holiday (*i.e.*, President’s Day), we are responding today.

b. The following entities have given their consent to our disclosure of their names:

- Cedars-Sinai;
- Columbia University;
- Fred Hutchison Cancer Research Center;
- Keck School of Medicine, University of Southern California;
- Memorial University;
- The Regents of the University of California;
- University of Michigan; and
- University of North Carolina at Chapel Hill.

Although, as discussed with you last week, we continue to work through the process of obtaining consent from other entities to which Novogenix has donated tissue, the entities disclosed today received the majority of tissue-donations from Novogenix. We renew our request from last week to have another week to work through the process of obtaining consent. Please advise. Thank you.

c. Today's voluntary disclosure of these entities' names to the Select Panel is confidential. We ask that the Select Panel not disclose their names to the public. This Select Panel was formed, after individuals filmed and published images of its interviews with Planned Parenthood employees. In the wake of the media storm and congressional investigations that followed, a deadly shooting took place at a Planned Parenthood clinic,² and an executive at a tissue procurement organization received death threats.³ Such violent acts thus give rise to our concerns about public disclosures in this matter.

d. Despite our requests for confidentiality, should the Select Panel, its members or staff decide to release any of the names we have disclosed herein, please notify us prior to such release.

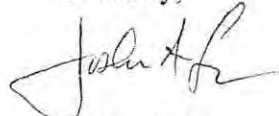
² Julie Turkewitz & Jack Healy, "3 Are Dead in Colorado Springs Shootout at Planned Parenthood Center," *N.Y. Times*, Nov. 27, 2015, at http://www.nytimes.com/2015/11/28/us/colorado-planned-parenthood-shooting.html?_r=0.

³ Mike Carter, "Puyallup Man Accused of Online Death Threats against California Company Officer," *The Seattle Times*, Dec. 27, 2015, at <http://www.seattletimes.com/seattle-news/crime/puyallup-man-accused-of-online-death-threats-against-california-company-officer/>.

Letter to M. Tallmer
February 13, 2016
Page 3 of 3

Thank you.

Sincerely,



Joshua A. Levy

Enclosures

cc: March Bell, Majority Staff Director
Heather Sawyer, Minority Staff Director

Exhibit 5.4.5

SUBPOENA

BY AUTHORITY OF THE HOUSE OF REPRESENTATIVES OF THE CONGRESS OF THE UNITED STATES OF AMERICA

To Novogenix Laboratories, LLC

You are hereby commanded to be and appear before the

Committee on Energy and Commerce

Select Investigative Panel on Infant Lives

of the House of Representatives of the United States at the place, date, and time specified below.

- ☒ **to produce the things identified on the attached schedule** touching matters of inquiry committed to said committee or subcommittee; and you are not to depart without leave of said committee or subcommittee.

Place of production: Room 316, Ford House Office Building, Washington, D.C. 20515

Date: May 11, 2016

Time: 5:00 p.m.

- ☐ **to testify at a deposition** touching matters of inquiry committed to said committee or subcommittee; and you are not to depart without leave of said committee or subcommittee.

Place of testimony: _____

Date: _____

Time: _____

- ☐ **to testify at a hearing** touching matters of inquiry committed to said committee or subcommittee; and you are not to depart without leave of said committee or subcommittee.

Place of testimony: _____

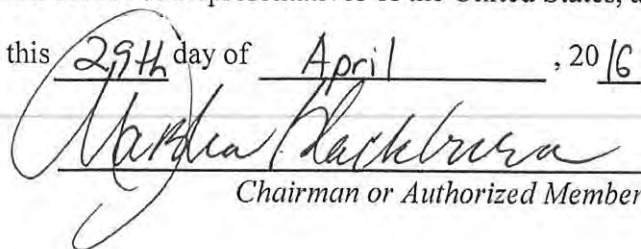
Date: _____

Time: _____

To _____
_____ to serve and make return.

Witness my hand and the seal of the House of Representatives of the United States, at

the city of Washington, D.C. this 29th day of April, 2016.


Chairman or Authorized Member

Attest:

Karen P. Naas
Clerk

PROOF OF SERVICE

Subpoena for

Novogenix Laboratories, LLC

Address c/o Joshua A. Levy, Esq., 1250 Connecticut Avenue N.W., Suite 200

Washington, D.C. 20036

before the Committee on Energy and Commerce

Select Investigative Panel on Infant Lives

U.S. House of Representatives
114th Congress

Served by (print name) _____

Title _____

Manner of service _____

Date _____

Signature of Server _____

Address _____

Novogenix Laboratories, LLC

In accordance with the attached schedule, instructions, and definitions, you, Novogenix Laboratories, LLC (“Novogenix”), are required to produce all documents in unredacted form described below:

- 1) Documents sufficient to show all entities, including firms, corporations, non-profit organizations, and educational institutions, from which Novogenix receives or procures fetal tissue.¹ Novogenix may produce a list of such entities in lieu of documents.
- 2) Documents sufficient to show all entities, including firms, corporations, non-profit organizations, and educational institutions, to which Novogenix sells or donates fetal tissue. Novogenix may produce a list of such entities in lieu of documents.
- 3) Documents sufficient to show all entities, including firms, corporations, non-profit organizations, and educational institutions, to which Novogenix transferred, subcontracted or sold any business interest or business assets related to the procurement or sale of fetal tissue. Novogenix may produce a list of such entities in lieu of documents.
- 4) Documents sufficient to reflect Novogenix’s organization chart, including information detailing Novogenix personnel who procure(d) fetal tissue at the clinic level and the supervisory personnel for those procurers of fetal tissue.
- 5) All communications, whether internal or external, that direct or relate to a direction to Novogenix personnel to procure fetal tissue, including, but not limited to memoranda, emails, telephone messages, and purchase orders or bills of sale.
- 6) All Novogenix accounting records, including but not limited to accounting memoranda related to the cost and pricing of fetal tissue.
- 7) Documents sufficient to show all institutions or entities to which Novogenix donated or provided fetal tissues for the following years: 2010, 2011, 2012, 2013, 2014 and 2015. You may provide a list of such institutions and entities in lieu of producing these documents.
- 8) Copies of all invoices (by month and year), reflecting the billing that Novogenix issued to all institutions or entities to which Novogenix donated or provided fetal tissues for the following years: 2010, 2011, 2012, 2013, 2014 and 2015.

¹ Please note that, for the purposes of this request, the term “fetal tissue” includes tissue, organs, body parts, and cell lines. See Definition ¶7.

- 9) Documents sufficient to show all institutions or entities from which Novogenix obtained fetal tissues for the following years: 2010, 2011, 2012, 2013, 2014 and 2015. You may provide a list of such institutions and entities in lieu of producing these documents.
- 10) Copies of all invoices (by month and year) reflecting the billing or payment of funds for fetal tissues obtained by Novogenix for the following years: 2010, 2011, 2012, 2013, 2014 and 2015.
- 11) A copy of any chart of accounts for Novogenix, including but not limited to account descriptions from any financial recording system relating to Novogenix.
- 12) Novogenix's end of year trial balance report and trial balance details for the following years: 2010, 2011, 2012, 2013, 2014 and 2015.
- 13) All documents reflecting Novogenix's statement of revenues (i.e., a breakdown by product categories) for the following years: 2010, 2011, 2012, 2013, 2014 and 2015.
- 14) All documents reflecting Novogenix's record of costs and expenses (i.e., a breakdown by operations, including fetal tissue acquisition) for administrative costs and expenses as well as compensation and benefits, for the following years: 2010, 2011, 2012, 2013, 2014 and 2015. Where applicable, records should include identification of vendors and descriptions of expenses.
- 15) Novogenix's balance sheets for the following years: 2010, 2011, 2012, 2013, 2014 and 2015. Audited statements should be provided, if available.
- 16) Novogenix's income statements, including but not limited to any profit and loss statements, statements of operations and statements of activities for the following years: 2010, 2011, 2012, 2013, 2014 and 2015. Audited statements should be provided, if available.
- 17) Copies of Novogenix's filed tax returns for the following years: 2010, 2011, 2012, 2013, 2014 and 2015.
- 18) All Novogenix bank statements from any financial institution where Novogenix has maintained an account for the following years: 2010, 2011, 2012, 2013, 2014 and 2015.
- 19) Documents sufficient to show how Novogenix calculates(d) the cost of a fetal tissue and all factors applied in determining pricing of fetal tissue. In lieu of these documents, you may provide a written explanation.
- 20) All specific requests made to Novogenix for fetal tissue made by any and all firms, corporations, non-profit organizations, educational institutions, or other entities, including, but not limited to, order lists, billing records, payment records, payment vouchers, and receipts.

- 21) All documents relating to the purchase, ownership, or rental by Novogenix of equipment involving fetal tissue research, the preparation of fetal tissue for research, the modification of fetal tissue into cell lines, or any other actions taken by Novogenix related to fetal tissue, including but not limited to, the date the equipment was purchased, its purchase price, its maintenance costs, and records of the depreciation treatment under the tax code of any such equipment.
- 22) An inventory record of all fetal tissues obtained, sold, or retained by Novogenix, as well as an inventory of current fetal tissue including, in particular, any records that refer to multiple tissue samples or organs or body parts harvested from a single fetus.
- 23) All records related to any fetal tissue or cell lines procured or sold from twin fetuses.
- 24) All documents relating to rent or site fees paid to entities from which Novogenix obtained, sold, or donated fetal tissue.
- 25) All training materials used by Novogenix for the procurement of fetal tissue, preparation of fetal tissue, storage of fetal tissue, and training materials or guidance documents related to Novogenix staff relations with personnel or patients at the source entities from which fetal tissue is procured.
- 26) All communications and documents referring or relating to Institutional Review Board (IRB), as defined by Title 45 of the Code of Federal Regulations, Part 46, consents for the period of March 29, 2012 through January 26, 2013.

Instructions

- 1) The relevant time period for above-referenced documents is January 1, 2010, to the present.
- 2) If there are no responsive documents, provide a written explanation detailing why no such documents exist.
- 3) In complying with this subpoena, you are directed that no document may be redacted in any way except that that all patient information protected by the American Health Portability and Accountability Act of 1998 (HIPAA) shall be redacted.
- 4) In complying with the subpoena, be apprised that the U.S. House of Representatives and the Committee on Energy and Commerce, Select Investigative Panel on Infant Lives ("Select Panel") do not recognize any of the non-disclosure privileges associated with the common law, with the Freedom of Information Act, with attorney client privilege, or contractual privileges such as non-disclosure agreements.

- 5) In complying with this subpoena, you are directed to produce all responsive documents that are in your possession, custody, or control, whether held by you or your past or present agents, employees, and representatives acting on your behalf. You are also directed to produce records that you have a legal right to obtain, that you have a right to copy or to which you have access, as well as records that you have placed in the temporary possession, custody, or control of any third party.
- 6) No records, documents, data or information called for by this request shall be destroyed, modified, removed, transferred or otherwise made inaccessible to the Select Panel.
- 7) In the event that any entity, organization or individual denoted in this subpoena has been, or is also known by any other name than that herein denoted, the subpoena shall be read also to include them under that alternative identification.
- 8) Each document produced shall be produced in a form that renders the document capable of being copied.
- 9) Documents produced in response to this subpoena shall be produced together with copies of file labels, dividers or identifying markers with which they were associated when this subpoena was served. To the extent that documents were not stored with file labels, dividers, or identifying markers, they shall be organized into separate folders by subject matter prior to production.
- 10) All documents or groups of documents, produced shall be identified by the paragraph number in the Attachment to the subpoena to which the documents, or groups of documents, are responsive.
- 11) It shall not be a basis for refusal to produce documents that any other person or entity also possesses non-identical or identical copies of the same document.
- 12) If any of the subpoenaed information is available in machine-readable or electronic form (such as on a computer server, hard drive, CD, DVD, memory stick, or computer back-up tape), you shall consult with Select Panel staff to determine the appropriate format in which to produce the information. Documents produced in electronic format shall be organized, identified, and indexed electronically in a manner comparable to the organizational structure called for in Paragraphs 8 and 9 above. Documents produced in an electronic format shall also be produced in searchable format.
- 13) If compliance with the subpoena cannot be made in full, compliance shall be made to the extent possible, and your production shall be accompanied by a written explanation of why full compliance is not possible.

- 14) In the event that a document is withheld on any basis, provide the following information concerning each and every such document withheld from production: (a) the reason the document is not being produced; (b) type of document; (c) general subject matter; (d) date, author and addressee; and (e) relationship of author and addressee to each other.
- 15) If any document responsive to this subpoena was, but no longer is, in your possession, custody, or control, identify the document (stating its date, author, subject and recipient(s)) and explain the circumstances by which the document ceased to be in your possession, custody, or control.
- 16) If a date or other descriptive detail set forth in this subpoena referring to a document is inaccurate, but the actual date or other descriptive detail is known to you or is otherwise apparent from the context of the request, you should produce all documents which would be responsive as if the date or other descriptive detail were correct.
- 17) This request is continuing in nature and applies to any newly-discovered information. Any record, document, compilation of data or information, not produced because it has not been located or discovered by the return date, shall be produced immediately upon location or discovery subsequent thereto.
- 18) All documents shall be Bates-stamped sequentially and produced sequentially.
- 19) Two sets of responsive records shall be produced, one set to the Majority staff and one set to the Minority staff. The Majority set shall be delivered to Majority staff in Room 316 of the Ford House Office Building and the Minority set shall be delivered to the Minority staff at 361 Ford House Office Building. You shall consult with the Select Panel staff regarding the method of delivery prior to sending any material.
- 20) Upon completion of the document production, you must submit a written certification, signed by you or your counsel, stating that: (1) a diligent search has been completed of all documents in your possession, custody, or control which reasonably could contain responsive documents; (2) documents responsive to the request have not been destroyed, modified, removed, transferred, or otherwise made inaccessible to the Select Panel since the date of receiving the Select Panel's request or in anticipation of receiving the Select Panel's request, and (3) all documents identified during the search that are responsive have been produced to the Select Panel, identified in a log provided to the Select Panel, as described in Paragraph 13 above.

Definitions

- 1) The term "document" means any written, recorded, or graphic matter of any nature whatsoever, regardless of how recorded, and whether original or copy, including but not

limited to, the following: memoranda, reports, expense reports, books, manuals, instructions, financial reports, accounting and financial records of any kind (including checks (front and back), wire transfers, cash or check payments or receipts, and check requests), working papers, records, notes, letters, notices, confirmations, telegrams, receipts, appraisals, pamphlets, magazines, newspapers, prospectuses, interoffice and intra-office communications, electronic mail ("e-mail"), instant messages, text messages, calendars, contracts, cables, notations of any type of conversation, telephone call, meeting or other communication, bulletins, printed matter, computer printouts, invoices, transcripts, diaries, analyses, returns, summaries, minutes, bills, accounts, estimates, projections, comparisons, messages, correspondence, press releases, circulars, financial statements, reviews, opinions, offers, studies and investigations, questionnaires and surveys, power point presentations, spreadsheets, and work sheets. The term "document" includes all drafts, preliminary versions, alterations, modifications, revisions, changes, and amendments to the foregoing, as well as any attachments or appendices thereto. The term "document" also means any graphic or oral records or representations of any kind (including, without limitation, photographs, charts, graphs, voice mails, microfiche, microfilm, videotapes, recordings, and motion pictures), electronic and mechanical records or representations of any kind (including, without limitation, tapes, cassettes, disks, computer server files, computer hard drive files, CDs, DVDs, back up tape, memory sticks, recordings, and removable computer media such as thumb drives, flash drives, memory cards, and external hard drives), and other written, printed, typed, or other graphic or recorded matter of any kind or nature, however produced or reproduced, and whether preserved in writing, film, tape, electronic format, disk, videotape or otherwise. A document bearing any notation not part of the original text is considered to be a separate document. A draft or non-identical copy is a separate document within the meaning of this term.

- 2) The term "documents in your possession, custody or control" means (a) documents that are in your possession, custody, or control, whether held by you or your past or present agents, employees, officers, directors, contractors, consultants, or representatives acting on your behalf; (b) documents that you have a legal right to obtain, that you have a right to copy, or to which you have access; and (c) documents that have been placed in the possession, custody, or control of any third party.
- 3) The term "communication" means each manner or means of disclosure, transmission, or exchange of information, in the form of facts, ideas, opinions, inquiries, or otherwise, regardless of means utilized, whether oral, electronic, by document or otherwise, and whether face-to-face, in a meeting, by telephone, mail, e-mail, instant message, text message, discussion, release, personal delivery, or otherwise.


- 4) The terms “and” and “or” should be construed broadly and either conjunctively or disjunctively as necessary to bring within the scope of this request any information which might otherwise be construed to be outside its scope. The singular includes the plural number, and vice versa. The masculine includes the feminine and neuter genders.
- 5) The terms “person” or “persons” mean natural persons, firms, partnerships, associations, limited liability corporations and companies, limited liability partnerships, corporations, subsidiaries, divisions, departments, joint ventures, proprietorships, syndicates, other legal, business or government entities, or any other organization or group of persons, and all subsidiaries, affiliates, divisions, departments, branches, and other units thereof.
- 6) The term “Novogenix” includes Novogenix Laboratories, LLC and any affiliates or related entities, all referred to herein, both individually and collectively, as “Novogenix”.
- 7) The term “fetal tissue” means tissue, organs, body parts, and cell lines.
- 8) The term “study” or “proposal” means any work or regime of biomedical research that led to a report or memoranda, whether published or not.
- 9) The terms “referring” or “relating,” with respect to any given subject, mean anything that constitutes, contains, embodies, reflects, identifies, states, refers to, deals with, or is in any manner whatsoever pertinent to that subject.
- 10) The terms “you” and “your” refer to Novogenix, as defined herein, whether known by this name or a different name, its past and present officers, directors, employees, consultants, contractors, agents, representatives, subsidiaries, and/or parents.

Exhibit 5.4.6

May 31, 2016

via Electronic Mail

CONFIDENTIAL – HIGHLY SENSITIVE INFORMATION

March Bell
Staff Director and Chief Counsel
U.S. House of Representatives Select Panel on Infant Lives


Re: Novogenix Laboratories, LLC

Dear March:

Through this letter, and in furtherance of our prior correspondence, the undersigned counsel for Novogenix Laboratories LLC (“Novogenix”) responds to Request No. 2 of the December 18, 2015, letter from the Select Panel, as modified in our e-mail correspondence of January 19, 2016. Nothing in this letter shall constitute a waiver of any of Novogenix’s privileges or rights, and Novogenix reserves the right to supplement this response.

2. A list of all entities, including firms, corporations, non-profit organizations, and educational institutions, to which Novogenix sells or donates fetal tissue.

a. Novogenix has not sold fetal tissue. Rather, Novogenix contracted with a number of scientists to be reimbursed for the costs of services performed by Novogenix, and each of those contracts includes a non-disclosure agreement. In January, we expressed our reservations about disclosing even the names of the institutions with which these scientists were affiliated at the time of the contract, due, in large part, to concerns about the safety of the individuals working there. However, in the interest of cooperating with the Select Panel, we have been working with dispatch to reach out to these entities in order to determine whether any of them would consent to our disclosure of their names to the Select Panel. Such a process has been necessary not only out of consideration for the well being of the people working at these entities, but also out of respect for the non-disclosure agreements in place.

CONFIDENTIAL – FOR DISCLOSURE TO THE SELECT PANEL ONLY

b. In addition to the entities we already have disclosed to the Select Panel, the following entities have given their consent to our disclosure of their names in response to this request:

- Baker IDI Heart and Diabetes Institute
- Biogen
- Children's Hospital Los Angeles
- City of Hope
- Fraunhofer Institute for Interfacial Engineering and Biotechnology IGB
- The Institute of Molecular Biotechnology GmbH
- Laval University
- Lund University
- Massachusetts Eye and Ear
- McGill University
- Rockefeller University
- Schepens Eye Research Institute
- The Children's Hospital of Philadelphia
- The Max Planck Institute of Molecular Cell Biology and Genetics
- The University of Alberta
- The University of Florida
- The University of Melbourne
- The University of Texas Southwestern Medical Center

The entities that we have disclosed to the Select Panel (today and previously) have received over 99% of the fetal tissue that Novogenix has donated.

c. Today's voluntary disclosure of the above entities' names to the Select Panel is confidential. We ask that the Select Panel not disclose their names to the public. This Select Panel was formed, after individuals filmed and then published heavily edited images and recordings of Planned Parenthood employees. In the wake of the media storm and congressional investigations that followed, a deadly shooting took place at a Planned Parenthood clinic,¹ and an executive at a tissue procurement organization received death threats.² Such violent acts thus give rise to our legitimate safety concerns about public disclosures in this matter.

¹ Julie Turkewitz & Jack Healy, "3 Are Dead in Colorado Springs Shootout at Planned Parenthood Center," *N.Y. Times*, Nov. 27, 2015, at http://www.nytimes.com/2015/11/28/us/colorado-planned-parenthood-shooting.html?_r=0.

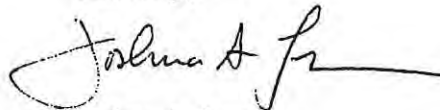
² Mike Carter, "Puyallup Man Accused of Online Death Threats against California Company Officer," *The Seattle Times*, Dec. 27, 2015, at

d. Despite our requests for confidentiality, should the Select Panel, its members or staff decide to release any of the names we have disclosed herein, please notify us prior to such release.

e. Per your request, we have been reviewing business records and intend on producing them soon, with the intention of helping the Select Panel verify our representation to the House Committee on Energy and Commerce that Novogenix lost money each year, from 2011-15, on its services related to the Select Panel's and the House Committee's inquiries.. We would like to discuss our production of business records with you, tomorrow, if you have time. Please let us know what times work best for you.

Thank you.

Sincerely,



Joshua A. Levy

cc: Heather Sawyer, Minority Staff Director

<http://www.seattletimes.com/seattle-news/crime/puyallup-man-accused-of-online-death-threats-against-california-company-officer/>.

CONFIDENTIAL – FOR DISCLOSURE TO THE SELECT PANEL ONLY

Exhibit 5.4.7

9/18/15

Briefing

Biographical info

- b. LA was a full time position (difference is size of affiliate)
 - i. While at PPLA
 - ii. 19 clinics at the time she left, approx. 20 now – March 2013
 - iii. Administrative office downtown and would travel to different sites to perform abortions
 - iv. Surgical abortion performed at 6 or 7 sites, medication performed at all sites with exception of express sites that performed non-abortion services
 - v. Colposcopy and _____ (pap smear) as it got bigger she trained mid-level physicians to perform, hired urologist to perform and oversee services; oversight of mid-level physicians who were performing birth control, mammogram, non-abortion services
 - vi. Over time, oversight increased
 - vii. Administrative side as medical director – oversight of other clinicians and services they were performing, interpret and write protocols for mid-level environment, oversee
 - 1. Medical assistants, RN, Advanced practice clinicians (nurse practitioners, physician assistants; licensed by state), physicians (providing surgical services) [common terminology in CA]
 - viii. Budget – income that was generated from clinical services to support clinical services and donations would go to advocacy, etc.
 - ix. Senior staff 2013 – configuration changed a lot; board, reporting to board was CEO, chief financial officer, office of counsel, medical director, IT dept., public affairs, _____
- c. OBGYN is medical training – practice and perform abortions
 - i. Training in Boston learned to perform up to 24 weeks, but at PPLA although supervised up to 24, personally only did up to 16 weeks
 - ii. While at PPLA half administrative half clinical position
- d. Serving as dual capacity at Pasadena – said she would help them out as medical director until they found someone but ended up becoming medical director
 - i. 4 clinics at Pasadena
 - ii. Office is at administrative headquarters; roughly same senior staff structure
- e. Medical Director Counsel
 - i. Affinity group within PP – board of trustees who manage, elected president in Oct. 2014 (around that time) for a 3 year term.

- ii. Includes all medical directors of all PP affiliates
- iii. 2014 asked to serve as president of
- iv. Counsel – advocacy group within PP family for medical directors; liaison for affiliate CEO group ASAC – how they can better support medical directors, how to understand perspective of physicians, liaison was sent to our group to talk about medical care – 1 week, 2x a year – meetings are all across the country
- v. Board of trustees meets over telephone as necessary

2. Medical Standards & Guidelines

- a. Responsibility to implement MS&G at affiliate
- b. Clinicians and physicians feel comfortable that medical care is highest standard and criteria – medical committee; clinicians in Oct/Nov get together and sit down and decides what the best treatment is for individual treatments (e.g. breast exams, abortion services, STD treatment)
- c. Medical division makes protocol; that is sent to each affiliate and customize it for local use; when she first started 130 affiliates and were trying to become more standardized but there were still differences in location; each state has different approach to public health
 - i. Medical director job is to take state requirements and match them up to MS&G
 - ii. Medical director's counsel is off to the side, subside branch, advocacy group, similar to CEO or CFO group
 - iii. [REDACTED] – chairs national committee; not sure of incoming chair; subcommittees; medical division fielded question from field, based on questions they are concerned about – subject matter (surgical questions, infectious disease questions)

3. Experience at PPLA –

- a. Had tissue donation program when she left. Had tissue donation program starting in 2010 (to the best of her knowledge).
- b. Development of program – approached by independent researchers and TPOs to participate. Board said we didn't want to get involved, declined opportunities to get involved. Approached by colleague at UCLA, group organizing TPO and you should talk to them. Spoke to Novagenix – impressed by them and work they were trying to do. Took to CEO and is it time to reopen discussion with board, talked internally, approached board, Novagenix came and gave presentation and decided to move forward with relationship with Novagenix.
 - i. Once a year or once every year from 1998 people would knock on our door and approach.
 - ii. When some other orgs. Knocked on the door and we approached the board, board not interested until 2010. Was a different board, they were more interested. No direct knowledge for why board was not interested; believe they were interested in focusing on core services at the time (Contraception, STD testing, etc.)

- iii. Was Novagenix different? Similar to previous companies, a little more academic, willing to share what they were doing with tissue – plus board had turned over; combination of the two.
1. PowerPoint,
 2. Came and approached me, sat down and had a conversation, invited them to talk to senior management team, they were impressed; approached CEO, she arranged for them to give PowerPoint to board, board interested, sat down and worked out details. Novagenix came and talked to front line staff.
 3. Man – partner (██████████?)
 4. Brought in contract template – clauses that the lawyers want to put in; CEO signed
 - a. VP, myself, lead clinician, administrator
 - b. Involved PPFA but exact nature I don't recall – would have sent to medical division of PPFA. If you are affiliate you apply to medical division for permission.
 - c. Approval in writing? Usually does come in writing, but no memory of something that came in writing for approval of this.
- iv. Board changes over every year – people have term limits.
- v. Novagenix proposing to start with 1 health center and if successful go to 2 and then 3. Send their staff person to our center and our staff would identify patients based on last menstrual period who were between 9-16; our staff would get informed consent for procedure, then our staff would say by the way we have program for tissue donation, are you interested? If interested, our staff would explain further and she would sign consent for tissue donation, then the chart would be flagged so surgeon would know she was donating. Technician (██████████) would take tissue, wrap it up.
1. Electronic medical record system, at time some things still needed to be signed, paper would follow patient. On door of procedure room, thin paper chart and notice would be on chart that they were donating tissue
 2. Sheet of paper that was a different color, that said "patient is performing tissue" or something.
 3. Doctor was supposed to know, and in every single instance, process was to flag it.
 4. Novagenix did not obtain consent, PP obtained consent. ██████████ did not obtain informed consent; she would talk to patient to confirm consent, proceed with termination.
 5. Started at Mark Tapper center.
 6. Cannot remember exactly, place for physician signature on page patient signed or check box I'm EMR system or separate sheet of

paper. Not sure where but there is a requirement for physician signature.

7. Personally not involved in 1 on 1 research projects, only involved in tissue being donated to entity.
8. Novagenix proposed \$45 and I had been approached by others before that have more dollars attached to it, spoke to medical directors and they were getting slightly more, did rough calculation of what cost would be and \$45 was well within ballpark of expenses and agreed to \$45 Novagenix proposal – per specimen for Novagenix to take away. Did not employ anyone to do an audit. Believe language did not specify that you needed to do that.
9. Pinpoint which version of documents you have, make affirmative position to tell you which one we think was enforced in 2010 when she was engaging in process in 2010.

In 2010 – understanding was she received in and was aware of it floating around in head, with updates; recall consulted protocol in 2010-did not use independent auditor, did informal rough calculation of cost.

- a. Consulted other affiliates; looked at staff time involved in triage, staff time in discussing tissue donation, consent, notification to patients chart, her time negotiating, space against cost of commercial relations, parking spaces; took basic cost and it seemed more than \$45.
 - b. Asked staff how long they think it would take them to do these things. Speaking to affiliates to see what they were receiving per specimen, felt she was being conservative because \$45 was low end, didn't ask them how they calculated. Talked to at least 3 affiliates but don't remember who, mostly in CA.
 - c. Specimen – fetal tissue. If I did 12 week abortion, she would take all or part of that – didn't charge by organ. Specimen is product of conception.
11. [REDACTED] – spoke about Novagenix. Met her when she moved to LA from Boston. Took over position of Director of Society of Planning Family Fellowship at UCLA. Independent provider who provided abortion services at PPLA. Their fellows trained at PPLA. Not involved in tissue donation to my knowledge.
 12. Other TPOs that contacted you? Don't think it was StemExpress, but other CA company. Don't think ABR approached us.

4. Memo – [REDACTED]

- a. Context of setting up tissue donation program in 2010
- b. Attached standard – “standard” memo that came from legal department but not at this time part of standards and guidelines; when I got this memo in 2001, we were

not doing tissue donation at the time. Time it was re-circulated; we used medical standard and guidelines for our program.

5. National Medical Committee
 - a. MS&G, in 2010 there was guidance on fetal tissue donation. Speculate that not all matters of medical care come before NMC; sometimes they are totally confident. Matters only come to NMC if there is controversy or multiple ways to do something.
 - b. Medical division within PPFA is in charge of NMC.
6. Experience with Fetal Tissue research
 - a. Yale
 - b. Approached by neuro researchers treatment of Parkinson's 6-9 months involved with procuring fetal tissue for research, received no compensation. Before statues came out in 1993. Did whatever technique was required to get tissue for them. Much different process. At the time there may have been changes in procedure. No other role in research, just providing tissue; no contract, informal.
 - c. CAPS – consortium for abortion providers. Interest group for abortion providers to talk to each other and find best way to do things; as time passed, CAPS was absorbed into bigger planned parenthood family.
7. Accreditation and Re-accreditation
 - a. Have been involved.
 - b. Used to be every 4 years, changed to every 3. Want same standards as outside non-PP. spend 3-4 days, review hundreds of charts, interview employees, 300 items look at clinical services, look at board, look at financial services, look at everything. Turn over a lot of rocks, look at certificates, are licenses up to date. Affiliate can say "class 1 good", class 2, class 3. PPLA and Pasadena always got Class 1 with some corrections, know when they are coming.
 - c. PPLA last audit [REDACTED] was involved in – may have been 2011 or 2012.
 - d. Can't recall specifically if tissue donation was reviewed but believe it would have been one of the things that was looked at.
 - e. Records would be in custody of PPLA. Outcomes provided to affiliate, accreditation would be with PPFA.
 - f. Separate affiliate evaluation department; affiliation and accreditation department
8. Records associated with procedure
 - a. Start with informed consent; typically also have discussion about what kind of birth control she is going to go on, might sign consent for that; then blood test done; then ultrasound and ultrasound picture as well as result is part of medical record – performed on every patient to determine gestational age; depending on gestational age if over 12 weeks she might take meds to make cervix softer (if under 26 might have STD testing); then go to procedure room and be identified are you sure want to do this; procedure done, tissue go to tissue room next door, surgeon will look to see If complete, if birth control that will be taken care of; will go to recovery room; then sent home with birth control – all documented (some paper, some electronic consent) version of consent will be same, signature unique

to her chart. Informed consent to donate, there will be paper form. In medical record, there is number of check boxes for outcome (disposed, donated, law enforcement, pathology (if anomaly with fetus). 98% routine disposal but if donated.

- b. Rate of donation in experience as clinician – at least 50% of patient agree to donate.
 - c. General as medication abortion is becoming more frequent, only up to 9 weeks, more early gestation and less late gestation.
 - d. Clinic she was at in PPLA when doing procedure went to 16 weeks, expanded to Bixby (?) site and went to 24 weeks. But use digoxin between 20-24 so only donating up to 20 weeks.
 - e. Ballpark 3,000-4,000 per year were 17-24 week gestation– maybe 15,000 total abortions per year (of 19 clinics) – at time she was there
9. Expansion of fetal tissue donation
- a. Was doing quite well, wanted to expand to give patients option to donate. Always the plan to start at one and expand to 2 or 3.
 - b. PP national standards and guidelines just took it wholesale mostly and put in our standards and guidelines. Recollection ours was the same as national.
 - c. Consent form – took wholesale consent form that had all standards and guidelines. 1 page consent form that came out from PPFA and we put in wholesale, they didn't permit us to modify that.
10. Human Transplantation
- a. Not changing timing, method or procedure. Do I know if TPO is in compliance, I have no way of knowing. I think our contract would state that all partners are in compliance.
 - b. Mentioned in broad strokes what diseases they were working on treatment for but don't remember specific methods. No expectation that she should know what research was for. Broad stroke answers e.g. management of diabetes
 - i. Not aware of patients asking questions about what not to donate for, occasionally ask to donate to specific program and we have to explain we don't have specific contracts with those orgs.
 - c. Not involved with specific research program/department. (while she was there)—consulted with her lawyer on this after he specified while she was there, does that indicate they have done this since?
 - d. Initial consent obtained by proxy
11. Knowledge of consent – do know that patient has consented before obtaining tissue.
- a. Exhibit 6 – changes in timing/procedure
 - b. Item B4 – no changes
 - c. Document produced by PPFA – need to consult them.
12. Novagenix agreement
- a. [REDACTED] could be person from Novagenix

- b. Exhibit B – tissue preparation services – not my area but I would understand tissue that was collected would go under processing techniques, but if asking for details, sorry don't know.
 - c. Any idea what the contract research would be? No.
 - d. Are they acquiring specimens or is the fee for services? Reimbursement for expenses. IS it for services or specimen? Not selling specimen, charging what costs are with expenses in providing tissue.
 - e. Look for documentation on use of specimen
 - f. Her recollection is that it was paid monthly. During her time, program extended to 2 clinics, one day a week at each clinic. Approx. at Mark Taper, guess maybe 20-22 procedures a day (9-10 would be eligible; half would agree so 4-5 per day). Bigger cases at other site (gestational age wise) 2-3 maybe a day. Novagenix was there for full day at both facilities.
 - g. 7 years required to obtain medical records; different for minor. Contract specified that they had to be 18 years of age or older. In CA you can get an abortion younger, but chose not to include in tissue donation program.
13. Ultrasound
- a. Some patients if question of completion, question of completion may bring in ultra sound machine.
 - b. Federal consent form – PPFA consent form was based on federal guidelines so I refer to it as a federal consent form.
14. Experience with fetal tissue donation, clinic in early 90s – no experience with fetal tissue donation.
15. Since video changed has status changed? No
- a. Conversation with PP officials about what was on that video? Pasadena has been
 - i. Provided security and emotional support
 - ii. In role as president of board of trustees – other conversations with medical directors some of who were also victimized; conversations with Cecile or people of that nature – no.
 - b. supportive, no conversation with PPFA about video (apart from discussion with lawyers)
 - c. Not considering establishing fetal tissue donation at Pasadena
 - d. Was it appropriate to discuss reimbursement in your role as medical director? Did not believe she was negotiation, preliminary discussion, CEO of PP Pasadena was aware – she understood it was preliminary, her issue was to make sure whatever number we were talking about covered cost.
16. Professional relationship with Dr. [REDACTED]? Already medical director at PPLA, trained USC fellows (contract), came over to train as part of fellowship, medical director at Santa Barbara facilitated by me, when she left I hired her to be contract provider and director of research program; then hired away by PPFA and I report to her in that role.
17. Fetal tissue donation was part of medical discussion
- a. Discussed in medical directors council meeting? Not in that context but discussion with other directors outside

- b. NMC? Don't recall specific conversations. May have come up but don't recall.
 - c. Roles and responsibilities as medical director – was part of medical discussion?
Within purview of medical director? Yes – part of responsibilities in terms of compliance with those requirements, tissue donation falls under medical staff (not legal); after I have initial conversation would talk to finance, legal, etc.
18. More interest in recent years? Constant – steady, is my impression. Haven't noticed uptick or decline in past 20 years.
19. Nothing prior to 2001 about tissue donation guidance. Was there anything that preceded this? Don't know if there was anything in 1998; if there is a new program it bubbles up and takes a while to get guidance.
20. Una: Novagenix contract viewed by counsel? Yes, also had process where we sent to PPFA.
21. Una: reason to believe it happened? From personal experience when doing cases, when she looked and saw that patient chart was flagged, also looked at consent – from personal experience, never aware of cases where tissue was taken away without consent.
- a. Never audited compliance, good suggestion though.
22. Guidance in effect in 2010 when fetal tissue donation program was created.

Exhibit 5.47

Advanced Bioscience Resources

September 3, 2015

Tab	Document Description
1.	ABR Code of Ethics
2.	ABR Discussion of Regulations
3.	Overview of ABR
4.	Program Functions
5.	November 21, 1997 Agreement with PP Mar Monte
6.	November 1, 2007 Agreement with PP Mar Monte
7.	November 2007 Business Associate Agreement with PP Mar Monte
8.	March 4, 2010 Letter from PP Mar Monte
9.	March 2010 Business Associate Agreement with PP Mar Monte
10.	June 14, 2010 Letter from PP Mar Monte with 30 day notice for termination of Nov. 1, 2007 agreement
11.	June 1, 1999 Agreement with PP San Diego/Riverside
12.	June 1, 2005 Agreement PP San Diego/Riverside
13.	September 24, 2010 Letter from PP San Diego & Riverside re: Name Change to PP Pacific Southwest
14.	October 1, 2010 Agreement with PP Pacific Southwest
15.	January 1, 2012 RTA Addendum to October 1, 2010 Agreement with PP Pacific Southwest
16.	Template Healthcare Provider Agreement
17.	ABR Pamphlet for Healthcare Provider Patients
18.	Current Tissue Donation Consent Form
19.	Procurement Specialist/Technician Job Description
20.	Template Warranty Letter to Researchers
21.	Template Application for Researchers
22.	Terms & Conditions of Service for Researchers
23.	Fees for Service Schedules 2010 – 2015 (for Researchers)

OVERVIEW

ADVANCED BIOSCIENCE RESOURCES is a non-profit corporate foundation established in 1989 under California law to provide biomedical researchers with access to human tissues. ABR was formed exclusively for biomedical, scientific, and educational purposes and is devoted to providing services in connection with the procurement of human organs and tissues for medical and scientific research. ABR specializes in the procurement, preservation and distribution of both human fetal tissues and full term umbilical cord blood for research, and provides a highly individualized, reliable and easily accessible service.

TISSUE COLLECTION AND DISTRIBUTION: The purpose of ABR is to promote cooperative efforts to collect and distribute human tissues and to thereby facilitate research utilizing those tissues. Trained personnel coordinate the retrieval, preservation and delivery of each specimen.

Tissues obtained through ABR are retrieved from routinely performed surgical procedures including first and second trimester induced abortions, and full term deliveries, either natural or caesarian section. Tissues that were once discarded are now available to scientists worldwide through the efforts of ABR. Researchers may specify tissue characteristics, preservation methods, and delivery times.

PRESERVATION METHODS: Each specimen is collected, preserved, and shipped according to the investigator's individual protocol.

QUALITY CONTROL: ABR practices strict quality control procedures and adheres to stringent guidelines for tissue collection and preservation. Consent is obtained in accordance with UAGA and NOTA and AATB guidelines. Tissue specimens are identified, dissected, and transferred to specified medium. A random control number is assigned to each sample to ensure patient identity confidentiality.

To assure proper processing of the tissue, every researcher selects a collection/preservation protocol tailored specifically to his needs. In the collection and distribution of these tissues, every effort is made to exercise the highest standards of medical and laboratory practice. ABR specializes in direct communication with each investigator from the initial application through tissue collection to specimen delivery.

APPLICATION PROCESS: To request human tissue for research, an application for tissue acquisition must be completed and submitted to ABR. The application identifies the medical/scientific institution and principal investigator, and the specific research work intended. The application is reviewed for feasibility and priority, and, if approved, a protocol will be developed to meet the individual research needs.

INVESTIGATOR APPROVAL: ABR will provide tissue to researchers when application information is verified, including information on current research funding and a short summary of their research intent. Investigators must agree to accept responsibility for the potential biohazard of the tissue and to appropriately train laboratory personnel in the proper handling of the tissue. In addition, the researcher must agree to use the tissue solely for research or transplantation research purposes and to acknowledge ABR in any publications resulting from the use of ABR- provided tissue.

SERVICE AND PROCESSING FEES: Participating medical facilities that enable ABR to execute its tissue acquisition and distribution programs may be paid a nominal fee for such services. A minimal processing / preservation / shipment fee is also assessed for services provided to research facilities.

Exhibit 5.48

FRED UPTON, MICHIGAN
CHAIRMAN

FRANK PALLONE, JR., NEW JERSEY
RANKING MEMBER

ONE HUNDRED FOURTEENTH CONGRESS
Congress of the United States
House of Representatives
COMMITTEE ON ENERGY AND COMMERCE
2125 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-6115
Majority (202) 225-2927
Minority (202) 225-3641

VIA EMAIL TO ATTORNEY OF RECORD

January 21, 2016

[REDACTED]
President
Advanced Bioscience Resources, Inc.

[REDACTED]
C/O Mr. Jonathan E. Lopez
Orrick, Herring & Sutcliff
[REDACTED]

Dear [REDACTED],

We thank you for your earlier production of Advanced Bioscience Resources (“ABR”) materials to the Committee on Energy and Commerce. On October 7, 2015, the U.S. House of Representatives passed H. Res. 461, which created the Select Panel on Infant Lives and empowered the panel to investigate issues related to fetal tissue research. This document request is made pursuant to the scope of investigative responsibility of the panel.

As a result, we are hereby requesting that you produce the following categories of documents and information created or dated on or after January 1, 2010:

- 1) A list of all entities, including firms, corporations, non-profit organizations, and educational institutions, from which ABR receives or procures fetal tissue.¹
- 2) A list of all entities, including firms, corporations, non-profit organizations, and educational institutions, to which ABR sells or donates fetal tissue.
- 3) A list of all entities, including firms, corporations, non-profit organizations, and educational institutions, to which ABR transferred, subcontracted or sold any business interest or business assets related to the procurement or sale of fetal tissue.
- 4) An organization chart that details ABR personnel that procure fetal tissue at the clinic level and the supervisory personnel for those procurers of fetal tissue.
- 5) All communications, whether internal or external, that direct ABR personnel to procure fetal tissue, including, but not limited to memoranda, emails, telephone messages, and purchase orders or bills of sale.
- 6) All accounting records including accounting memoranda related to the cost and pricing of fetal tissue.
- 7) All specific requests made to ABR for fetal tissue made by any and all firms, corporations, non-profit organizations, educational institutions, or other entities, including, but not limited to, order lists, billing records, payment records, payment vouchers, and receipts.
- 8) All documents relating to the purchase, ownership, or rental by ABR of equipment involving fetal tissue research, the preparation of fetal tissue for research, the modification of fetal tissue into cell lines, or any other actions taken by ABR related to fetal tissue, including but not limited to, the date the equipment was purchased, its purchase price, its maintenance costs, and records of the depreciation treatment under the tax code of any such equipment.
- 9) An inventory record of all fetal tissues obtained, sold, or retained by ABR, as well as an inventory of current fetal tissue including, in particular, any records that refer to multiple tissue samples or organs or body parts harvested from a single fetus.
- 10) All records related to any fetal tissue or cell lines procured or sold from twin fetuses.
- 11) All documents relating to rent or site fees paid to entities from which ABR obtained, sold, or donated fetal tissue.
- 12) All training materials used by ABR for the procurement of fetal tissue, preparation of fetal tissue, storage of fetal tissue, and training materials or guidance documents

¹ Please note that, for the purposes of this request, the term “fetal tissue” includes tissue, organs, body parts, and cell lines.

related to ABR staff relations with personnel or patients at the source entities from which fetal tissue is procured.

- 13) All ABR banking records related to the procurement, sale, donation, or distribution or shipment of fetal tissue.

Please produce the requested documents by the close of business on February 5, 2016. Instructions for responding to the Select Panel's document requests are included as an attachment to this letter.

If you have any questions about this request, please contact Matthew Tallmer of the Select Panel Staff at (202) 225-2927, or by email at Matthew.Tallmer@mail.house.gov.

Sincerely yours,

A handwritten signature in black ink, appearing to read "Marsha Blackburn", written in a cursive style.

Marsha Blackburn
Chair
Select Panel on Infant Lives

Attachment(s)

cc: The Honorable Jan Schakowsky, Ranking Member
Select Panel on Infant Lives

Exhibit 5.49

SUBPOENA

BY AUTHORITY OF THE HOUSE OF REPRESENTATIVES OF THE CONGRESS OF THE UNITED STATES OF AMERICA

To Advanced Bioscience Resources, Inc.

You are hereby commanded to be and appear before the
Committee on Energy and Commerce

Select Investigative Panel on Infant Lives

of the House of Representatives of the United States at the place, date, and time specified below.

- ☒ **to produce the things identified on the attached schedule** touching matters of inquiry committed to said committee or subcommittee; and you are not to depart without leave of said committee or subcommittee.

Place of production: Room 316, Ford House Office Building, Washington, D.C. 20515

Date: May 17, 2016

Time: 5:00 p.m.

- ☐ **to testify at a deposition** touching matters of inquiry committed to said committee or subcommittee; and you are not to depart without leave of said committee or subcommittee.

Place of testimony: _____

Date: _____

Time: _____

- ☐ **to testify at a hearing** touching matters of inquiry committed to said committee or subcommittee; and you are not to depart without leave of said committee or subcommittee.

Place of testimony: _____

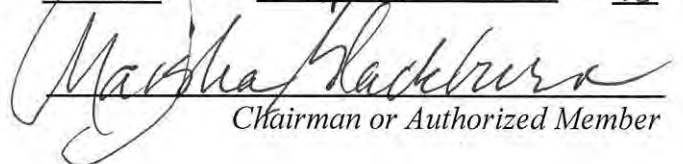
Date: _____

Time: _____

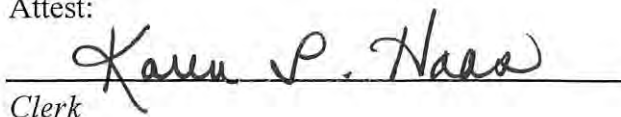
To _____
_____ to serve and make return.

Witness my hand and the seal of the House of Representatives of the United States, at

the city of Washington, D.C. this 29th day of April, 20 16.


Chairman or Authorized Member

Attest:


Clerk

PROOF OF SERVICE

Subpoena for

Advanced Bioscience Resources, Inc.

Address c/o Jonathan E, Lopez, Esq., Orrick, Herrington & Sutcliffe, [REDACTED]

[REDACTED]

before the Committee on Energy and Commerce

Select Investigative Panel on Infant Lives

U.S. House of Representatives
114th Congress

Served by (print name) _____

Title _____

Manner of service _____

Date _____

Signature of Server _____

Address _____

Advanced Bioscience Resources, Inc.

In accordance with the attached schedule, instructions, and definitions, you, Advanced Bioscience Resources, Inc. (“ABR”), are required to produce all documents in unredacted form described below:

- 1) Documents sufficient to show all entities, including firms, corporations, non-profit organizations, and educational institutions, from which ABR receives or procures fetal tissue.¹ ABR may produce a list of such entities in lieu of documents.
- 2) Documents sufficient to show all entities, including firms, corporations, non-profit organizations, and educational institutions, to which ABR sells or donates fetal tissue. ABR may produce a list of such entities in lieu of documents.
- 3) Documents sufficient to show all entities, including firms, corporations, non-profit organizations, and educational institutions, to which ABR transferred, subcontracted or sold any business interest or business assets related to the procurement or sale of fetal tissue. ABR may produce a list of such entities in lieu of documents.
- 4) Documents sufficient to reflect ABR’s organization chart, including information detailing ABR personnel that procure(d) fetal tissue at the clinic level and the supervisory personnel for those procurers of fetal tissue.
- 5) All communications, whether internal or external, that direct or relate to a direction to ABR personnel to procure fetal tissue, including, but not limited to memoranda, emails, telephone messages, and purchase orders or bills of sale.
- 6) All ABR accounting records, including accounting memoranda related to the cost and pricing of fetal tissue.
- 7) Documents sufficient to show all institutions or entities to which ABR donated or provided fetal tissues for the following years: 2010, 2011, 2012, 2013, 2014 and 2015. You may provide a list of such institutions and entities in lieu of producing these documents.
- 8) Copies of all invoices (by month and year), reflecting the billing that ABR issued to all institutions or entities to which ABR donated or provided fetal tissues for the following years: 2010, 2011, 2012, 2013, 2014 and 2015.

¹ Please note that, for the purposes of this request, the term “fetal tissue” includes tissue, organs, body parts, and cell lines. See Definition ¶7.

- 9) Documents sufficient to show all institutions or entities from which ABR obtained fetal tissues for the following years: 2010, 2011, 2012, 2013, 2014 and 2015. You may provide a list of such institutions and entities in lieu of producing these documents.
- 10) Copies of all invoices (by month and year) reflecting the billing or payment of funds for fetal tissues obtained by ABR for the following years: 2010, 2011, 2012, 2013, 2014 and 2015.
- 11) A copy of any chart of accounts for ABR, including but not limited to account descriptions from any financial recording system relating to ABR.
- 12) ABR's end of year trial balance report and trial balance details for the following years: 2010, 2011, 2012, 2013, 2014 and 2015.
- 13) All documents reflecting ABR's statement of revenues (i.e., a breakdown by product categories) for the following years: 2010, 2011, 2012, 2013, 2014 and 2015.
- 14) All documents reflecting ABR's record of costs and expenses (i.e., a breakdown by operations, including fetal tissue acquisition) for administrative costs and expenses as well as compensation and benefits, for the following years: 2010, 2011, 2012, 2013, 2014 and 2015. Where applicable, records should include identification of vendors and descriptions of expenses.
- 15) ABR's balance sheets for the following years: 2010, 2011, 2012, 2013, 2014 and 2015. Audited statements should be provided, if available.
- 16) ABR's income statements, including but not limited to any profit and loss statements, statements of operations and statements of activities for the following years: 2010, 2011, 2012, 2013, 2014 and 2015. Audited statements should be provided, if available.
- 17) Copies of ABR's filed tax returns for the following years: 2010, 2011, 2012, 2013, 2014 and 2015.
- 18) All ABR bank statements from any financial institution where ABR has maintained an account for the following years: 2010, 2011, 2012, 2013, 2014 and 2015.
- 19) Documents sufficient to show how ABR calculates(d) the cost of a fetal tissue and all factors applied in determining pricing of fetal tissue. In lieu of these documents, you may provide a written explanation.
- 20) All specific requests made to ABR for fetal tissue made by any and all firms, corporations, non-profit organizations, educational institutions, or other entities, including, but not limited to, order lists, billing records, payment records, payment vouchers, and receipts.

- 21) All documents relating to the purchase, ownership, or rental by ABR of equipment involving fetal tissue research, the preparation of fetal tissue for research, the modification of fetal tissue into cell lines, or any other actions taken by ABR related to fetal tissue, including but not limited to, the date the equipment was purchased, its purchase price, its maintenance costs, and records of the depreciation treatment under the tax code of any such equipment.
- 22) An inventory record of all fetal tissues obtained, sold, or retained by ABR, as well as an inventory of current fetal tissue including, in particular, any records that refer to multiple tissue samples or organs or body parts harvested from a single fetus.
- 23) All records related to any fetal tissue or cell lines procured or sold from twin fetuses.
- 24) All documents relating to rent or site fees paid to entities from which ABR obtained, sold, or donated fetal tissue.
- 25) All training materials used by ABR for the procurement of fetal tissue, preparation of fetal tissue, storage of fetal tissue, and training materials or guidance documents related to ABR staff relations with personnel or patients at the source entities from which fetal tissue is procured.
- 26) All communications and documents referring or relating to Institutional Review Board (IRB), as defined by Title 45 of the Code of Federal Regulations, Part 46, consents for the period of March 29, 2012 through January 26, 2013.

Instructions

- 1) The relevant time period for above-referenced documents is January 1, 2010, to the present.
- 2) If there are no responsive documents, provide a written explanation detailing why no such documents exist.
- 3) In complying with this subpoena, you are directed that no document may be redacted in any way except that that all patient information protected by the American Health Portability and Accountability Act of 1998 (HIPAA) shall be redacted.
- 4) In complying with the subpoena, be apprised that the U.S. House of Representatives and the Committee on Energy and Commerce, Select Investigative Panel on Infant Lives (“Select Panel”) do not recognize any of the non-disclosure privileges associated with the common law, with the Freedom of Information Act, with attorney client privilege, or contractual privileges such as non-disclosure agreements.

- 5) In complying with this subpoena, you are directed to produce all responsive documents that are in your possession, custody, or control, whether held by you or your past or present agents, employees, and representatives acting on your behalf. You are also directed to produce records that you have a legal right to obtain, that you have a right to copy or to which you have access, as well as records that you have placed in the temporary possession, custody, or control of any third party.
- 6) No records, documents, data or information called for by this request shall be destroyed, modified, removed, transferred or otherwise made inaccessible to the Select Panel.
- 7) In the event that any entity, organization or individual denoted in this subpoena has been, or is also known by any other name than that herein denoted, the subpoena shall be read also to include them under that alternative identification.
- 8) Each document produced shall be produced in a form that renders the document capable of being copied.
- 9) Documents produced in response to this subpoena shall be produced together with copies of file labels, dividers or identifying markers with which they were associated when this subpoena was served. To the extent that documents were not stored with file labels, dividers, or identifying markers, they shall be organized into separate folders by subject matter prior to production.
- 10) All documents or groups of documents, produced shall be identified by the paragraph number in the Attachment to the subpoena to which the documents, or groups of documents, are responsive.
- 11) It shall not be a basis for refusal to produce documents that any other person or entity also possesses non-identical or identical copies of the same document.
- 12) If any of the subpoenaed information is available in machine-readable or electronic form (such as on a computer server, hard drive, CD, DVD, memory stick, or computer back-up tape), you shall consult with Select Panel staff to determine the appropriate format in which to produce the information. Documents produced in electronic format shall be organized, identified, and indexed electronically in a manner comparable to the organizational structure called for in Paragraphs 8 and 9 above. Documents produced in an electronic format shall also be produced in searchable format.
- 13) If compliance with the subpoena cannot be made in full, compliance shall be made to the extent possible, and your production shall be accompanied by a written explanation of why full compliance is not possible.

- 14) In the event that a document is withheld on any basis, provide the following information concerning each and every such document withheld from production: (a) the reason the document is not being produced; (b) type of document; (c) general subject matter; (d) date, author and addressee; and (e) relationship of author and addressee to each other.
- 15) If any document responsive to this subpoena was, but no longer is, in your possession, custody, or control, identify the document (stating its date, author, subject and recipient(s)) and explain the circumstances by which the document ceased to be in your possession, custody, or control.
- 16) If a date or other descriptive detail set forth in this subpoena referring to a document is inaccurate, but the actual date or other descriptive detail is known to you or is otherwise apparent from the context of the request, you should produce all documents which would be responsive as if the date or other descriptive detail were correct.
- 17) This request is continuing in nature and applies to any newly-discovered information. Any record, document, compilation of data or information, not produced because it has not been located or discovered by the return date, shall be produced immediately upon location or discovery subsequent thereto.
- 18) All documents shall be Bates-stamped sequentially and produced sequentially.
- 19) Two sets of responsive records shall be produced, one set to the Majority staff and one set to the Minority staff. The Majority set shall be delivered to Majority staff in Room 316 of the Ford House Office Building and the Minority set shall be delivered to the Minority staff at 361 Ford House Office Building. You shall consult with the Select Panel staff regarding the method of delivery prior to sending any material.
- 20) Upon completion of the document production, you must submit a written certification, signed by you or your counsel, stating that: (1) a diligent search has been completed of all documents in your possession, custody, or control which reasonably could contain responsive documents; (2) documents responsive to the request have not been destroyed, modified, removed, transferred, or otherwise made inaccessible to the Select Panel since the date of receiving the Select Panel's request or in anticipation of receiving the Select Panel's request, and (3) all documents identified during the search that are responsive have been produced to the Select Panel, identified in a log provided to the Select Panel, as described in Paragraph 13 above.

Definitions

- 1) The term "document" means any written, recorded, or graphic matter of any nature whatsoever, regardless of how recorded, and whether original or copy, including but not

limited to, the following: memoranda, reports, expense reports, books, manuals, instructions, financial reports, accounting and financial records of any kind (including checks (front and back), wire transfers, cash or check payments or receipts, and check requests), working papers, records, notes, letters, notices, confirmations, telegrams, receipts, appraisals, pamphlets, magazines, newspapers, prospectuses, interoffice and intra-office communications, electronic mail ("e-mail"), instant messages, text messages, calendars, contracts, cables, notations of any type of conversation, telephone call, meeting or other communication, bulletins, printed matter, computer printouts, invoices, transcripts, diaries, analyses, returns, summaries, minutes, bills, accounts, estimates, projections, comparisons, messages, correspondence, press releases, circulars, financial statements, reviews, opinions, offers, studies and investigations, questionnaires and surveys, power point presentations, spreadsheets, and work sheets. The term "document" includes all drafts, preliminary versions, alterations, modifications, revisions, changes, and amendments to the foregoing, as well as any attachments or appendices thereto. The term "document" also means any graphic or oral records or representations of any kind (including, without limitation, photographs, charts, graphs, voice mails, microfiche, microfilm, videotapes, recordings, and motion pictures), electronic and mechanical records or representations of any kind (including, without limitation, tapes, cassettes, disks, computer server files, computer hard drive files, CDs, DVDs, back up tape, memory sticks, recordings, and removable computer media such as thumb drives, flash drives, memory cards, and external hard drives), and other written, printed, typed, or other graphic or recorded matter of any kind or nature, however produced or reproduced, and whether preserved in writing, film, tape, electronic format, disk, videotape or otherwise. A document bearing any notation not part of the original text is considered to be a separate document. A draft or non-identical copy is a separate document within the meaning of this term.

- 2) The term "documents in your possession, custody or control" means (a) documents that are in your possession, custody, or control, whether held by you or your past or present agents, employees, officers, directors, contractors, consultants, or representatives acting on your behalf; (b) documents that you have a legal right to obtain, that you have a right to copy, or to which you have access; and (c) documents that have been placed in the possession, custody, or control of any third party.
- 3) The term "communication" means each manner or means of disclosure, transmission, or exchange of information, in the form of facts, ideas, opinions, inquiries, or otherwise, regardless of means utilized, whether oral, electronic, by document or otherwise, and whether face-to-face, in a meeting, by telephone, mail, e-mail, instant message, text message, discussion, release, personal delivery, or otherwise.

- 4) The terms “and” and “or” should be construed broadly and either conjunctively or disjunctively as necessary to bring within the scope of this request any information which might otherwise be construed to be outside its scope. The singular includes the plural number, and vice versa. The masculine includes the feminine and neuter genders.
- 5) The terms “person” or “persons” mean natural persons, firms, partnerships, associations, limited liability corporations and companies, limited liability partnerships, corporations, subsidiaries, divisions, departments, joint ventures, proprietorships, syndicates, other legal, business or government entities, or any other organization or group of persons, and all subsidiaries, affiliates, divisions, departments, branches, and other units thereof.
- 6) The term “ABR” includes Advanced Bioscience Resources, Inc. and any affiliates or related entities, all referred to herein, both individually and collectively, as “ABR”.
- 7) The term “fetal tissue” means tissue, organs, body parts, and cell lines.
- 8) The term “study” or “proposal” means any work or regime of biomedical research that led to a report or memoranda, whether published or not.
- 9) The terms “referring” or “relating,” with respect to any given subject, mean anything that constitutes, contains, embodies, reflects, identifies, states, refers to, deals with, or is in any manner whatsoever pertinent to that subject.
- 10) The terms “you” and “your” refer to ABR, as defined herein, whether known by this name or a different name, its past and present officers, directors, employees, consultants, contractors, agents, representatives, subsidiaries, and/or parents.

Exhibit 5.50

Advanced Bioscience Resources, Inc.

Privileged and Confidential



ORRICK

ABR Overview

- ABR is a small non-profit entity that is a respected partner to educational and medical institutions around the world.
- ABR specializes in the procurement, preservation, and distribution to researchers of donated tissue and blood.
 - Includes fetal tissue, maternal blood, amniotic fluid, and umbilical cord blood.
- ABR does not do independent lab work on cells or tissue (i.e., no stem cell isolation).
- ABR receives the tissue or other material from the health care provider (HCP), procures and packages the specimens from the tissue or other material, and provides the specimens to researchers.

ABR Overview

- [REDACTED] ABR's founder, is a registered nurse and former donor transplant coordinator.
 - At UCLA's Organ Procurement Agency, [REDACTED] saw the potential for lifesaving research resulting from organ and tissue donation.
 - She then created ABR to serve as an intermediary between HCPs and researchers to facilitate biomedical research.
- ABR has been a 501(c)(3) non-profit since 1992.
- There are 6 full-time and 5 part-time employees:
 - 6 Administrative staff
 - 3 Procurement staff
 - 1 Medical Advisor
 - 1 Scientific Advisor

Key Points

- No Financial Incentives. ABR employees are paid a salary or an hourly wage, and are not incentivized, financially or otherwise, to collect particular fetal tissue.
 - There are no bonus or other incentive payments based on number or type of specimens collected.
 - Employee evaluations are not in any way based on number or type of specimens collected.
 - There are no quotas for collection.
- No Change in Procedure. ABR does not ask the HCPs to change their procedures.

Key Points Cont'd

- Fees for Services. Fees for services and facilities include costs for clinical staff obtaining consents, maintaining records, transferring fetal tissue, clinical space, and utilities.
- Flat Fees. ABR pays HCPs a flat fee for services on a product of conception (POC) basis, regardless of how many, or what type, of specimens are procured from the POC or the term of the POC.
- Fees for Researchers. ABR has a set schedule of fees for fetal and blood specimens.
 - The fee does not vary based on type of fetal specimen.

ABR Procurement Specialists/Technicians

- ABR has stringent standards regarding procurement specialists:
 - Medical background with a certification in phlebotomy.
 - Receive on-the-job training for 4 to 8 weeks.
 - Trained by ABR Procurement Manager (20+ years experience) and/or ABR President (30+ years experience).
- Trainings emphasize ABR is a guest of the HCP and may not interfere with procedures.
- Compensation is **not** tied to procurement.
 - An hourly wage, healthcare benefits, and a 401K are provided.

Daily Snapshot

- Contact HCP about surgery schedule;
 - Specialists visit 1-2 HCP facilities/week, 4-5 days/week;
- Confirm consent with HCP staff/records;
- At the conclusion of each consenting surgery, procurement specialists:
 - Identify and remove viable tissues that fulfill pending requests;
 - Place tissue in appropriate media, and package;
 - Prepare shipping boxes and deliver to transporter;
 - Receive or perform pre- or post-operative blood draw from appropriate donors, and complete lab requisitions for testing;
- Provide updates to ABR on requests as they are fulfilled.

Agreements with Researchers

- Application Process:
 - Application includes summary of research.
 - Applications are reviewed by ABR's President, Procurement Manager, QA/QC Manager, Scientific Director, and Medical Director.
 - Review is focused on scientific credibility and feasibility.
- Terms and Conditions of Application:
 - Makes clear the services that ABR will provide, including that donated tissue will be obtained from consenting donors in compliance with all laws.
- ABR does **not** have a website for researcher requests.

Conclusion

ABR was established to help lifesaving medical research, and that goal has shaped ABR's mission, policies, and process for over 25 years.

ABR respects the need to review its processes and the surrounding issues that accompany working in this field.

It is in this spirit that ABR is cooperating and will continue to cooperate with the present inquiries.

Exhibit 5.51

COPY

AGREEMENT

This agreement is made as of June 1, 1999 by Advanced Bioscience Resources, Inc. ("ABR"), a non-profit corporation organized and existing under the laws of California, and Planned Parenthood of San Diego and Riverside Counties, a professional corporation.

WHEREAS, ABR is an organization devoted to providing services in connection with the procurement of human organs and tissues for medical research; and

WHEREAS, Planned Parenthood of San Diego and Riverside Counties may wish to provide services to ABR to facilitate the accomplishment of such purpose;

NOW, THEREFORE, in consideration of the premises and mutual covenants contained herein, the parties agree as follows:

1. The term "fetal organ" has the same meaning as the term defined in 42 U.S.C.A. 274 e(c)(1) of the National Organ Transplant Act, that is, the human kidney, liver, heart, lung, pancreas, bone marrow, cornea, eye, organ or any subpart thereof, as derived from a fetus.

2. The term "product of conception" ("POC") means any fetal organ or other fetal or placental material taken from the human uterus during an abortion. Acquisition of the products of conception is provided as a service to the research community. The products of conception are being supplied to ABR with no warranties, expressed or implied, including any warranty of merchantability or fitness for a particular purpose.

ABR will take reasonable steps to assure that the products of conception shall be for use in scientific research and that all applicable guidelines set forth by the National Institutes of Health (NIH) or other government agencies regarding the use of the products of conception shall be followed.

Planned Parenthood shall not bear any risk, directly or indirectly, from any handling, preparation, shipment or use of the fetal tissue acquired and distributed by ABR, including, but not exclusive of, any viral or bacterial contaminants.

3. Planned Parenthood of San Diego and Riverside Counties will provide, and ABR will pay the reasonable costs for, services and facilities (hereinafter collectively "services") associated with obtaining consents and with the removal of fetal organs and tissues from POCs, and their processing, preservation, quality control, transportation, and storage; including appropriate space in which employees can accomplish the work of ABR, disposal services for non-used portions of biological waste materials, and for seeking consent for donation of organs and tissues from appropriate donors, and maintaining records of such consents so that verification of consent can be supported. Planned Parenthood of San Diego and Riverside Counties will designate an employee to perform the work required by ABR.

4. The fee charged to ABR for the services specified in this Agreement in connection with each POC provided to ABR shall be forty-five dollars (\$45.00).

5. Any information obtained from Planned Parenthood of San Diego and Riverside Counties' patients' charts shall be privileged and the contents of same shall be held so as to preserve the confidentiality of patients. ABR is not entitled to and will not receive information concerning identity of donors except as specified.

6. The term of this Agreement shall be for one (1) year, beginning from the date hereof, and terminating one (1) year thereafter, unless either of the parties hereto shall have given the other thirty (30) days' written notice of its intention to terminate this Agreement, whereupon same shall terminate thirty (30) days after date of said notice. In default of notice as aforesaid from either party hereto, this Agreement shall continue for further successive terms of one (1) year thereafter and, in default of thirty (30) days' written notice before the end of an annual term either of the parties hereto of its intention not to renew, whereupon this Agreement shall terminate at the end of said term.

7. Written notices pursuant to this Agreement shall be sent first class mail, postage prepaid, to:

Planned Parenthood of San Diego and Riverside Counties

Advanced Bioscience Resources, Inc.

8. The parties do not know how many patients will sign the consent forms in agreement to donate POCs for research, and therefore do not know how many POCs will be supplied thereunder. Planned Parenthood of San Diego and Riverside Counties shall not be obligated to provide any minimum number of POCs; ABR shall not be obligated to take any minimum number of POCs, nor shall ABR be obligated to take all the POCs made available by Planned Parenthood of San Diego and Riverside Counties.

9. The parties hereto hereby mutually agree to defend, protect, and save harmless each other's officers, directors, agents and/or employees or consultants from and against all expenses, liabilities, demands or claims for loss or damage to, property, or personal injury or death suffered as a result of any actions by the parties hereto in the performance of the Agreement and attributable to the fault or negligence of the parties hereto or their respective officers, directors, agents and/or employees or consultants.

10. No modification to this Agreement, nor any waiver of any rights, shall be effective unless agreed in writing by the party to be charged with such waiver or modification, and the waiver of any breach or default shall not constitute a waiver of any other right hereunder or any subsequent breach or default.

11. This Agreement constitutes the entire and exclusive agreement between the parties hereto with respect to its subject matter and merges all other communication and discussion, oral or written.

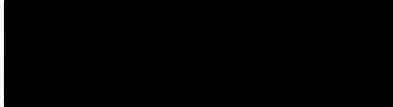
12. This Agreement shall be governed by and interpreted under the laws of the State of California, excluding rules of conflicts of law and venue for any dispute arising hereunder shall be in the County of San Diego, California.

13. The prevailing party in any action to enforce the terms of the Agreement shall be entitled to reimbursement by the other party for all costs (including the reasonable fees of attorneys and other professionals) incurred in connection with such proceeding.

14. This Agreement may be executed in counterparts, each of which will be deemed an original, but both of which together will constitute one and the same instrument.


IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed in duplicate by their duly authorized representatives as of the date first above written.

Planned Parenthood of San Diego and
Riverside Counties



President and CEO

Advanced Bioscience Resources, Inc.

By: 

President

Federal E.I.N.: 94-3110160
California E.I.N.: 370-20518

AGREEMENT

This agreement is made as of June 1, 2005, by Advanced Bioscience Resources, Inc. ("ABR"), a non-profit corporation organized and existing under the laws of California, and Planned Parenthood of San Diego and Riverside Counties ("PPSDRC"), a professional corporation.

WHEREAS, ABR is an organization devoted to providing services in connection with the procurement of human organs and tissues for medical research; and

WHEREAS, PSDRC may wish to provide services to ABR to facilitate the accomplishment of such purpose;

NOW, THEREFORE, in consideration of the premises and mutual covenants contained herein, the parties agree as follows:

1. The term "fetal organ" has the same meaning as the term defined in 42 U.S.C.A. 274 e(c)(1) of the National Organ Transplant Act; that is, the human kidney, liver, heart, lung, pancreas, bone marrow, cornea, eye, organ or any subpart thereof, as derived from a fetus.
2. The term "product of conception" ("POC") means any fetal organ or other fetal or placental material taken from the human uterus during an abortion. Acquisition of the products of conception is provided as a service to the research community. The products of conception are being supplied to ABR with no warranties, expressed or implied, including any warranty of merchantability or fitness for a particular purpose.

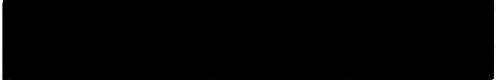

ABR will take reasonable steps to assure that the products of conception shall be for use in scientific research and that all applicable guidelines set forth by the National Institutes of Health (NIH) or other government agencies regarding the use of the products of conception shall be followed.

PPSDRC shall not bear any risk, directly or indirectly, from any handling, preparation, shipment or use of the fetal tissue acquired and distributed by ABR, including, but not exclusive of, any viral or bacterial contaminants.

3. PSDRC will provide, and ABR will pay the reasonable costs for, services and facilities (hereinafter collectively "services") associated with obtaining consents and with the removal of fetal organs and tissues from POCs, and their processing, preservation, quality control, transportation, and storage; including appropriate space in which employees can accomplish the work of ABR, disposal services for non-used portions of biological waste materials, and for seeking consent for donation of organs and tissues from appropriate donors, and maintaining records of such consents so that verification of consent can be supported. ABR will hire an employee to perform the work required by ABR.

4. The fee charged to ABR for the services specified in this Agreement in connection with each POC provided to ABR shall be fifty-five dollars (\$55.00).
5. Any information obtained from PPSDRC's patients' charts shall be privileged and the contents of same shall be held so as to preserve the confidentiality of patients. ABR is not entitled to and will not receive information concerning identity of donors except as specified.
6. The term of this Agreement shall be for three (3) years, beginning from the date hereof, and terminating three (3) years thereafter, unless either of the parties hereto shall have given the other thirty (30) days' written notice of its intention to terminate this Agreement, whereupon same shall terminate thirty (30) days after date of said notice. In default of notice as aforesaid from either party hereto, this Agreement shall continue for further successive terms of one (1) year thereafter and, in default, of thirty (30) days' written notice before the end of an annual term either of the parties hereto of its intention not to renew, whereupon this Agreement shall terminate at the end of said term.
7. Written notices pursuant to this Agreement shall be sent first class mail, postage prepaid, to:

Planned Parenthood of San Diego and Riverside Counties


Advanced Bioscience Resources, Inc.


8. The parties do not know how many patients will sign the consent forms in agreement to donate POCs for research, and therefore, do not know how many POCs will be supplied thereunder. PPSDRC shall not be obligated to provide any minimum number of POCs; ABR shall not be obligated to take any minimum number of POCs, nor shall ABR be obligated to take all the POCs made available by PPSDRC.
9. The parties hereto hereby mutually agree to defend, protect, and save harmless each other's officers, directors, agents and/or employees or consultants from and against all expenses, liabilities, demands or claims for loss or damage to, property, or personal injury or death suffered as a result of any actions by the parties hereto in the performance of the Agreement and attributable to the fault or negligence of the parties hereto or their respective officers, directors, agents and/or employees or consultants.

10. No modification to this Agreement, nor any waiver of any rights, shall be effective unless agreed in writing by the party to be charged with such waiver or modification, and the waiver of any breach or default shall not constitute a waiver of any other right hereunder or any subsequent breach or default.
11. This Agreement constitutes the entire and exclusive agreement between the parties hereto with respect to its subject matter and merges all other communication and discussion, oral or written.
12. This Agreement shall be governed by and interpreted under the laws of the State of California, excluding rules of conflicts of law and venue for any dispute arising hereunder shall be in the County of San Diego, California or County of Riverside, California.
13. The prevailing party in any action to enforce the terms of the Agreement shall be entitled to reimbursement by the other party for all costs (including the reasonable fees of attorneys and other professionals) incurred in connection with such proceeding.
14. This Agreement may be executed in counterparts, each of which will be deemed an original, but both of which together will constitute one and the same instrument.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed in duplicate by their duly authorized representatives as of the date first above written.

Planned Parenthood of San Diego and Riverside
Counties

By: _____

President and CEO

Advanced Bioscience Resources, Inc.

By: _____


President

Federal E.I.N.: 94-3110160
California E.I.N.: 3709-20518



Planned Parenthood[®] of the Pacific Southwest

9/24/10

Advanced Bioscience


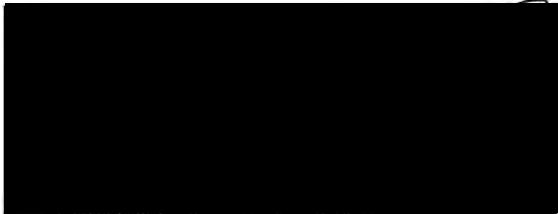

Re: Fetal Tissue Research.
Contract effective 6/1/2005 through 5/31/2010.

Dear Advanced Bioscience

Effective October 4, 2010, we are changing our name. Our new name is:

Planned Parenthood of the Pacific Southwest

Please accept this letter as your official notification of this name change. Attached is a copy of the Certified Amendment to our Articles of Incorporation. All other business information such as address and phone number will remain the same. Should you require other documentation or forms to be completed, please forward them to our office.


PPPSW Accounting Manager


Attachment: Copy of approved & Amended Articles of Incorporation

ENDORSED - FILED
in the office of the Secretary of State
of the State of California

AUG 23 2010

CERTIFICATE OF AMENDMENT OF
ARTICLES OF INCORPORATION

The undersigned certify that:

1. They are the president and the secretary, respectively, of Planned Parenthood of San Diego and Riverside Counties, a California corporation.

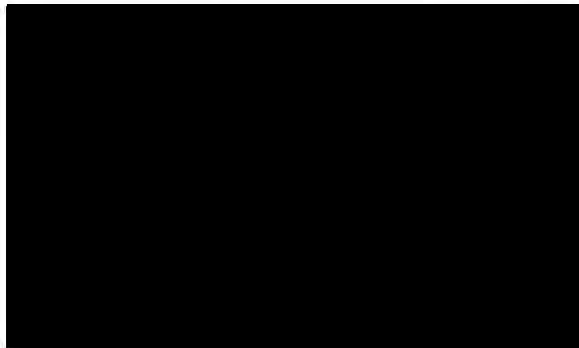
2. Article I of the Articles of Incorporation of this corporation is amended to read as follows:

The name of this corporation is Planned Parenthood of the Pacific Southwest

3. The foregoing amendment of Articles of Incorporation has been duly approved by the board of directors.

4. The corporation has no members.

We further declare under penalty of perjury under the laws of the State of California that the matters set forth in this certificate are true and correct of our own knowledge.

Date: 8/23/10

AGREEMENT

This agreement is made as of October 1, 2010 between Advanced Bioscience Resources, Inc. ("ABR"), a non-profit corporation organized and existing under the laws of California, and Planned Parenthood of the Pacific Southwest ("PPPSW"), a professional corporation.

WHEREAS, ABR is an organization devoted to providing services in connection with the procurement of human organs and tissues for medical research; and

WHEREAS, PPPS has agreed to provide services to ABR to facilitate the accomplishment of such purpose;

NOW, THEREFORE, in consideration of the premises and mutual covenants contained herein, the parties agree as follows:

1. The term "fetal organ" has the same meaning as the term defined in 42 U.S.C.A. 274 e(c)(1) of the National Organ Transplant Act; that is, the human kidney, liver, heart, lung, pancreas, bone marrow, cornea, eye, organ or any subpart thereof, as derived from a fetus.
2. The term "product of conception" ("POC") means any fetal organ or other fetal or placental material taken from the human uterus during an abortion. Acquisition of the products of conception is provided as a service to the research community. The products of conception are being supplied to ABR with no warranties, expressed or implied, including any warranty of merchantability or fitness for a particular purpose.

ABR will take reasonable steps to assure that the products of conception shall be for use in scientific research and that all applicable guidelines set forth by the National Institutes of Health (NIH) or other governmental agencies regarding the use of the products of conception shall be followed.

PPPSW shall not bear any risk, directly or indirectly, from any handling, preparation, shipment or use of the fetal tissue acquired and distributed by ABR, including, but not exclusive of, any viral or bacterial contaminants.

3. PPPSW will provide, and ABR will pay the reasonable costs for, services and facilities (hereinafter collectively "services") associated with obtaining consents and with the removal of fetal organs and tissues from POCs, and their processing, preservation, quality control, transportation, and storage; including appropriate space in which ABR employees can work, disposal services for non-used portions of cadaveric materials, and for seeking consent for donation of tissues and organs from appropriate donors, and maintaining records of such consents so that verification of consent can be supported. ABR will hire an employee to perform the work required by ABR.

4. The charge to ABR for the services specified in this Agreement in connection with each POC provided to ABR shall be sixty dollars (\$60.00).
5. Any information obtained from PPPS patients' charts shall be privileged and the contents of same shall be held so as to preserve the confidentiality of patients. ABR is not entitled to and will not receive information concerning identity of donors except as specified.
6. The term of this Agreement shall be for three (3) years, beginning from the date hereof, and terminating three (3) years thereafter, unless either of the parties hereto shall have given the other thirty (30) days' written notice of its intention to terminate this Agreement, whereupon same shall terminate thirty (30) days after date of said notice. In default of notice as aforesaid from either party hereto, this Agreement shall continue for further successive terms of one (1) year thereafter and, in default of thirty (30) days' written notice before the end of an annual term either of the parties hereto of its intention not to renew, whereupon this Agreement shall terminate at the end of said term.
7. Written notices pursuant to this Agreement shall be sent first class mail, postage prepaid, to:

Planned Parenthood of the Pacific Southwest

Advanced Bioscience Resources, Inc.

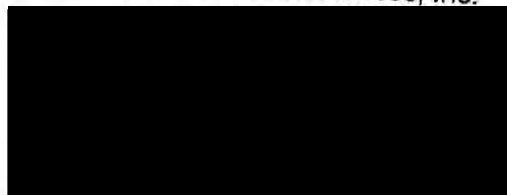
8. The parties do not know how many patients will sign the consent forms in agreement to donate POC's for research and therapy, and therefore do not know how many POC's will be supplied thereunder. PPPS shall not be obligated to provide any minimum number of POC's; ABR shall not be obligated to take any minimum number of POCs, nor shall ABR be obligated to take all the POCs made available by PPPS.
9. The parties hereto hereby mutually agree to defend, protect, and save harmless each other's officers, directors, agents and/or employees or consultants from and against all expenses, liabilities, demand or claims for loss or damage to, property, or personal injury or death suffered as a result of any actions by the parties hereto in the performance of the Agreement and attributable to the fault or negligence of the parties hereto or their respective officers, directors, agents and/or employees or consultants.

10. No modification to this Agreement, nor any waiver of any rights, shall be effective unless agreed in writing by the party to be charged with such waiver or modification, and the waiver of any breach or default shall not constitute a waiver of any other right hereunder or any subsequent breach or default.
 11. This Agreement constitutes the entire and exclusive agreement between the parties hereto with respect to its subject matter and merges all other communication and discussion, oral or written.
 12. This Agreement shall be governed by and interpreted under the laws of the State of California, excluding rules of conflicts of law, and venue for any dispute arising hereunder shall be in the County of San Diego, California or in the County of Riverside, California.
 13. The prevailing party in any action to enforce the terms of the Agreement shall be entitled to reimbursement by the other party for all costs (including the reasonable fees of attorneys and other professionals) incurred in connection with such proceeding.
 14. This Agreement may be executed in counterparts, each of which will be deemed an original, but both of which together will constitute one and the same instrument.
- IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed in duplicate by their duly authorized representatives as of the date first above written.

Planned Parenthood of the Pacific Southwest



Advanced Bioscience Resources, Inc.



Federal EIN: 94-3110160
California EIN: 370-20518
FDA FEI: 3005208435

ADVANCED BIOSCIENCE RESOURCES, INC

ADDENDUM to the OCTOBER 2010 AGREEMENT

RE: Regulated Tissue Acquisition (RTA)

This Addendum is made as of January 1, 2012, to the October 2010 Agreement between Advanced Bioscience Resources, Inc. ("ABR"), a non-profit foundation organized and existing under the laws of California, and Planned Parenthood of the Pacific Southwest (PPPSW), a professional corporation.

WHEREAS, ABR is an organization devoted to providing services in connection with the procurement of human organs and tissues for medical research and therapeutic use; and

WHEREAS, PPPSW has agreed to provide services to ABR to facilitate the accomplishment of such purpose;

NOW, THEREFORE, in consideration of the premises and mutual covenants contained herein, PPPSW and ABR agree as follows:

1. ABR's Regulated Tissue Acquisition requires a 2-consecutive-day commitment, hereinafter termed the "RTA component".
 - a. ABR Procurement Specialist staff will be present in the designated PPPSW facility the day prior to surgery (Day 1) for the identification, interview and selection of patients as potential candidates for the RTA.
 - b. ABR Procurement Specialist CTBS staff will be present in the PPPSW facility the day of surgery (Day 2) for the acquisition of specific tissues from the selected patients and for the coordination of the documentation and distribution of RTA tissues.
 - c. More than one RTA component may take place in any given week, potentially utilizing two RTA facilities in one week.
 - d. RTA procurement is dependent solely upon ABR-affiliated bio-medical requests.
 - e. Advance notification to PPPSW of each requested RTA component will occur at least one week prior to the requested RTA component.
2. In addition to Item 3 in the PPPSW / ABR Agreement of October 2010, PPPSW and ABR agree that:
 - a. PPPSW will provide ABR with the private use of a designated space, hereinafter termed "clean space", within the utilized Planned Parenthood of the Pacific Southwest facility(s), to accomplish the required tasks as set forth in the RTA components.
 - b. The assigned "clean space" will be designated for the use of ABR personnel during the RTA components; the assigned "clean space" location will be consistent from week to week; and the assigned "clean space" will be available to ABR up to 8 hours per day during the 2-day RTA component, to allow ABR to accomplish all tasks necessary to the RTA.
3. PPPSW and ABR also agree that:
 - a. The charge to ABR for the services specified in this Addendum in connection with each 2-day RTA Component shall be \$1000 (one thousand dollars).
 - b. If there is no cause for ABR to be present in the PPPSW facility on Day 2 of the RTA component, that is, if there are no qualifying patients on Day 1 of the RTA component, then the charge to ABR for the services of providing the assigned "clean space" shall be \$500 (five hundred dollars) only, for Day 1 only.
 - c. Payment is due within 45 days from the date service was rendered. Payments for services relating to RTA components will be separate and distinct from the payments for services referenced in the October 2010 PPPSW / ABR Agreement, and will be recorded as "RTA Reimbursement".
4. This Addendum is an addition to the October 2010 Agreement, and does not alter any item in the October 2010 Agreement.
5. This Addendum may be executed in counterparts, each of which will be deemed an original, but both of which together will constitute one and the same instrument.

IN WITNESS WHEREOF, the parties hereto have caused this Addendum to be executed in duplicate by their duly authorized representatives as of the date first above written.

Planned Parenthood of the Pacific Southwest

By: _____

SR VP of Patient Services

Advanced Bioscience Resources, Inc.

President

CONFIDENTIAL - TREATMENT REQUESTED

10-865-5872 / Fax 510-865-4090 / email abr@abrcorp.org HCEC000039

AGREEMENT

This agreement is made as of "DATE" between Advanced Bioscience Resources, Inc. ("ABR"), a non-profit foundation organized and existing under the laws of California, and "FACILITY", a professional corporation.

WHEREAS, ABR is an organization devoted to providing services in connection with the procurement of human organs and tissues for medical research; and

WHEREAS, "FACILITY" has agreed to provide services to ABR to facilitate the accomplishment of such purpose;

NOW, THEREFORE, in consideration of the premises and mutual covenants contained herein, the parties agree as follows:

1. The term "fetal organ" has the same meaning as the term defined in 42 U.S.C.A. 274 e(c)(1) of the National Organ Transplant Act; that is, the human kidney, liver, heart, lung, pancreas, bone marrow, cornea, eye, organ or any subpart thereof, as derived from a fetus.
2. The term "product of conception" ("POC") means any fetal organ or other fetal or placental material taken from the human uterus during an abortion.
3. "FACILITY" will provide, and ABR will pay the reasonable costs for, services and facilities (hereinafter collectively "services") associated with obtaining patients' consents and with the removal of fetal organs from POCs, and their processing, preservation, quality control, transportation, and storage; including appropriate space in which ABR employees can work, disposal services for non-used portions of cadaveric materials; and for seeking consent for donation of tissues and organs from appropriate donors, which includes consent for the acquisition of blood samples for testing pertinent to specified research, and maintaining records of such consents so that verification of consent can be supported.
4. The charge to ABR for the services specified in this Agreement in connection with each POC provided to and used by ABR shall be fifty dollars (\$50.00).
5. Any information obtained from "FACILITY" patients' charts shall be privileged and the contents of same shall be held so as to preserve the confidentiality of patients. ABR is not entitled to and will not receive information concerning identity of donors except as specified per HIPAA Privacy Rule.
6. ABR warrants that its employees will have current certification for phlebotomy, as well as current OSHA and HIPAA training and certification. ABR warrants that its employees have been verified for employment through appropriate background checks and warrants that no ABR employee working at "FACILITY" sites has any record of a criminal conviction. An authorized representative of "FACILITY" may conduct audits of ABR employee files at the offices of ABR at 1516 Oak Street, Suite 303, in Alameda, California, upon notification and request.
7. The term of this Agreement shall be for one (1) year, beginning from the date hereof, and terminating one (1) year thereafter, unless either of the parties hereto shall have given the other thirty (30) days' written notice of its intention to terminate this Agreement, whereupon same shall terminate thirty (30) days after date of said notice. In default of notice as aforesaid from either party hereto, this Agreement shall continue for further successive terms of one (1) year thereafter and, in default of thirty (30) days' written notice before the end of an annual term either of the parties hereto of its intention not to renew, whereupon this Agreement shall terminate at the end of said term.

8. Written notices pursuant to this Agreement shall be sent first class mail, postage prepaid, to:

"FACILITY"

Advanced Bioscience Resources, Inc.

9. The parties do not know how many patients will sign the consent forms in agreement to donate POC's for research, and therefore do not know how many POCs may be supplied thereunder. "FACILITY" shall not be obligated to provide any minimum number of POCs; ABR shall not be obligated to take any minimum number of POCs, nor shall ABR be obligated to take all the POCs made available by "FACILITY".

10. The parties hereto hereby mutually agree to defend, protect, and save harmless each other's officers, directors, agents and/or employees or consultants from and against all expenses, liabilities, demand or claims for loss or damage to, property, or personal injury or death suffered as a result of any actions by the parties hereto in the performance of the Agreement and attributable to the fault or negligence of the parties hereto or their respective officers, directors, agents and/or employees or consultants.

11. No modification to this Agreement, nor any waiver of any rights, shall be effective unless agreed in writing by the party to be charged with such waiver or modification, and the waiver of any breach or default shall not constitute a waiver of any other right hereunder or any subsequent breach or default.

12. This Agreement constitutes the entire and exclusive agreement between the parties hereto with respect to its subject matter and merges all other communication and discussion, oral or written.

13. This Agreement shall be governed by and interpreted under the laws of the State of California, excluding rules of conflicts of law and venue for any dispute arising hereunder shall be in the County of Alameda.

14. The prevailing party in any action to enforce the terms of the Agreement shall be entitled to reimbursement by the other party for all costs (including the reasonable fees of attorneys and other professionals) incurred in connection with such proceeding.

15. This Agreement may be executed in counterparts, each of which will be deemed an original, but both of which together will constitute one and the same instrument.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed in duplicate by their duly authorized representatives as of the date first above written.

"FACILITY"

By: _____

Advanced Bioscience Resources, Inc.

By: _____
President, CTBS

Federal EIN: 94-3110160
California EIN: 370-20518
FDA DHHS FEI: 3005208435

Exhibit 5.52

PROCUREMENT SPECIALIST / TECHNICIAN
JOB DESCRIPTION

REQUIREMENTS

1. Energetic, self-motivated, ability to work independently, ability to 'multi-task'
2. Skilled, proficient, and certified in phlebotomy
3. Experienced in medical field in general, preferably in women's health care
4. Knowledge of human anatomy
5. Knowledge and application of sterile / aseptic technique
6. Impeccable documentation skills and excellent communication skills
7. Flexibility regarding work availability and ability to work with medical staff
8. Current driver's license in state of residence, have reliable vehicle with current insurance

DUTIES AND RESPONSIBILITIES

PROCUREMENT - Tissue Acquisition and Distribution

1. Maintain professional contact with medical facility to report daily to ABR the number of potential cases for tissue procurement, surgery start times & other pertinent information
2. Set up for procurement at the medical facility, review ABR tissue procurement schedule requests
3. At the completion of each surgery, identify and remove requested tissues, place in appropriate media and package according to researcher protocols
4. Prepare shipping boxes for local and out-of-state tissue shipment, according to established protocols
5. Draw blood from appropriate donors, complete lab requisitions for testing
6. Document all information on appropriate forms
7. Maintain frequent communication with medical facility and ABR personnel regarding procurement
8. Assure delivery of packages to Fed Ex for shipment to various research facilities
9. Fax completed forms as required to ABR
10. Clean up procurement work area before leaving facility

WAGE AND BENEFITS

1. Employment is probationary for a 30 day period
2. Training period of 4 to 6 weeks, 4 to 6 hours per day, variable Tuesday through Saturday, hourly pay \$15.00
3. Mileage reimbursed at current established rate; other expenses reimbursed with submitted receipts
4. 90% medical insurance, 100% dental and vision insurance, life insurance, direct deposit, credit union,
5. Eligible for 401K participation after 1 year of employment

GENERAL

1. Be polite, courteous and professional at all times, maintain flexibility
2. Maintain a respectful relationship with all personnel
3. Attend scheduled ABR staff meetings, and be a company team player

Exhibit 5.53



February 24, 2016

Jonathan E. Lopez
[REDACTED]

VIA EMAIL
CONFIDENTIAL TREATMENT REQUESTED

Marsha Blackburn
Chair
Select Panel on Infant Lives
Committee on Energy and Commerce
House of Representatives
2125 Rayburn House Office Building
Washington, DC 20515-6115

Re: Supplemental Response to Select Panel Document Request – December 17, 2015

Dear Ms. Blackburn:

As part of Advanced Bioscience Resources' ("ABR") continued cooperation with the Select Panel on Infant Lives' investigation authorized under House Resolution 461 and the related document request dated December 17, 2015, ABR provides the following supplemental response to our January 8, 2016 response:

- **Request 5:** You have requested additional clarification about ABR's recordkeeping procedures. ABR communicates with its staff, healthcare providers, and researchers predominantly via telephone and fax, and does not maintain records of these communications on a consistent basis. Accordingly, there are very few communications that ABR can produce to the Select Panel as part of this inquiry. However, to provide the Select Panel insight into ABR's processes, the following describes the procurement process after a researcher is approved through ABR's application and vetting procedure: (1) a researcher sends in a request to ABR via facsimile, email, or phone call; (2) a procurement log notes which specimens are collected each day and is communicated to ABR's head office to notify that a request has been fulfilled; (3) the researcher receives notification of procurement, which can be by email or phone call; and (4) the research or medical institution receives an invoice for the specimens procured. We are enclosing a complete request and fulfillment record for your convenience (*see* SP000744-SP000747).

The above-referenced documents are in addition to those included in ABR's January 8, 2016 production, i.e. a sampling of procurement logs (*see e.g.*, SP000365-SP000407), invoices to researchers (*see e.g.*, SP000651-SP000743) and fee statements that are provided to providers (*see e.g.*, SP000065-SP000364).



CONFIDENTIAL TREATMENT REQUESTED

Marsha Blackburn

February 24, 2016

Page 2

- **Request 6:** You requested additional clarification as to the basis for ABR's fees and expenses. As ABR President [REDACTED] explained to Committee Staff in September 2015, ABR does not have any memoranda or other documented analysis of its fees and expenses, but the January 8, 2016 production provided:
 - A summary of the income and expenses related to ABR's fetal tissue procurement from 2009-2013 (*see* SP000063);
 - ABR's contracts with Planned Parenthood affiliates, which include the flat fee reimbursement amounts (*see* SP000008 - SP000043);
 - Statements of Facility Fees and Bill History documents that reflect the total amounts paid to Planned Parenthood affiliates for a select time period (*see* SP000064 - SP000364);
 - Fee For Services Schedules from 2010-2015 (*see* SP000052 - SP000058); and
 - Tissue Acquisition Invoices that reflect the total amounts paid by researchers for procurement services for a select time period (*see* SP000651 – SP000743).
- **Request 8:** You requested confirmation about ABR's equipment. ABR uses basic equipment, such as forceps, petri dishes, and coolers for packing and shipment during tissue procurement. ABR does not provide any other services other than simple tissue procurement, and does not use any other equipment.
- **Requests 9 and 10:** You requested confirmation about ABR's practices with respect to multiple specimens. ABR reimburses healthcare providers per product of conception regardless of the number of specimens procured. Additionally, ABR does not provide any compensation incentive to its employees in connection with fetal tissue procurement. Finally, the records that ABR maintains are reflected in the POC log samples that were provided.
- **Request 11:** As we discussed, ABR pays rental fees to one provider for office space that is separate from the clinical space.
- **Request 12:** You requested additional information on ABR's training process. As we explained during our September 2015 presentation, ABR provides multiple weeks of on-hand training for each procurement technician. The training is overseen by either [REDACTED] or the Procurement Manager, both of whom have over 20 years of experience, and



CONFIDENTIAL TREATMENT REQUESTED

Marsha Blackburn

February 24, 2016

Page 3

covers the entire procurement process. Annual meetings also cover training principles and questions.

- **Request 13:** We appreciate the Select Panel understanding the extensive breadth of this request considering the number of years ABR has existed. As discussed with the Select Panel committee staff, they include routine expenses for travel, lodging, etc. and, as agreed with staff, we have tabled this request for future discussion.

We are also including with this response a PowerPoint presentation regarding ABR's background and other relevant information.

ABR respectfully requests that all materials provided to Select Panel during the course of its inquiry, as well as this transmittal letter, (collectively, "ABR materials") be deemed private and confidential. ABR's productions do not waive any privileges that may be available to ABR. ABR also requests that the ABR materials be kept in a non-public file and that only Select Panel members and their staff have access to them. Should the Select Panel receive any request for these documents or have the need to disclose them in a hearing or otherwise, we request that the undersigned be notified immediately of the request or disclosure (preferably by telephone), be provided a copy of all materials pertaining to the request or disclosure, and be given a reasonable opportunity to respond, before any determination that ABR materials be produced or disclosed. We further request that we be notified promptly of any determinations with respect to such requests or disclosure and be given ten (10) days' notice before any intended release.

Please contact me if you have any questions about this production or any other issue.

Thank you for your cooperation.

Very truly yours,

A handwritten signature in black ink, appearing to read "Jonathan E. Lopez".

Jonathan E. Lopez

Enclosure

cc: Matthew Tallmer (matthew.tallmer@mail.house.gov)
Heather Sawyer (heather.sawyer@mail.house.gov)

Exhibit 5.54

Monday, February 28, 2011

Invoice Number: 300-RB

hFTR

U.C.H.C.
ACCOUNTS PAYABLE NOV 06 2011

2011 OCT 27 A 8:40

Grant:

User: 46

Division of Neuroscience

Order
number:
6505

Tissue:
2/16/2011

16 weeks Br TC

Processing
charge:

\$250.00

Total # of Specimens: 1

Processing Fee Total *: \$250.00

Make check payable to: **AECOM** (Please
write invoice number on check).

Mail check to:

AECOM

* Charges only reflect the cost of processing each specimen.

000005

Thursday, March 31, 2011

Invoice Number: 305-RB

hFTR

U.C.H.C.
ACCOUNTS PAYABLE

2011 OCT 27 A 8:40

Grant:

User: 46

Division of Neuroscience
Univ. of Connecticut Health Ctr.

Order
number:
6518

Tissue:
3/30/2011

17 weeks Br TC

Processing
charge:
\$250.00

Total # of Specimens: 1

Processing Fee Total *: \$250.00

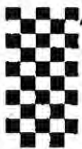
Make check payable to: **AECOM** (Please
write invoice number on check).

Mail check to:

AECOM

* Charges only reflect the cost of processing each specimen.

000006



Friday, April 25, 2014



JUN 26 2014
RG PD

Invoice Number: 460-RB

Human Fetal Tissue Repository

Grant:
User: 46



Univ. of Connecticut Health Ctr.



Order
number:
7073

Tissue:
4/16/2014

18 weeks Br TC

Processing
charge:
\$250.00

Total # of Specimens:

1

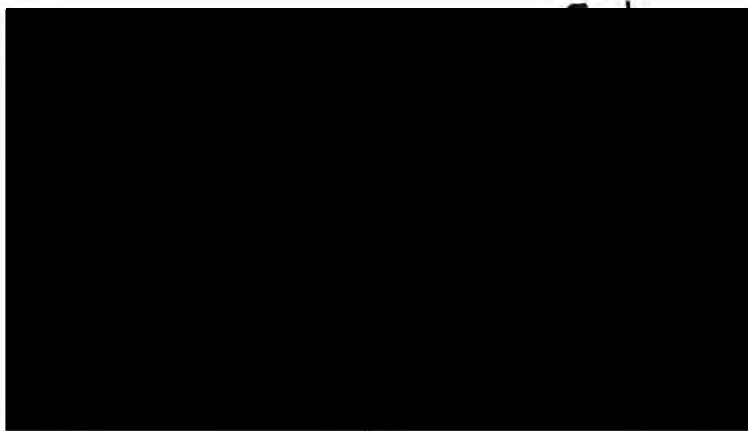
Make check payable to: Yeshiva University
(Please write invoice number on check).

Processing Fee Total *:

\$250.00

Mail check to:

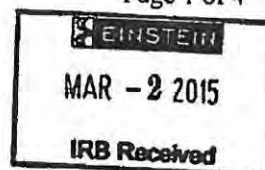
Yeshiva University
Albert Einstein College of
Medicine



* Charges only reflect the cost of processing each specimen



Exhibit 5.55



ALBERT EINSTEIN COLLEGE OF MEDICINE
OF YESHIVA UNIVERSITY
Committee on Clinical Investigations
and
MONTEFIORE MEDICAL CENTER
Institutional Review Board

Date Submitted: 2/27/2015 10:29:07 AM

Progress Report: 1993 - 042 - 013
MMC No.: 93-12-432
HHC No.: *01-243
Investigator: [REDACTED]
Investigator Phone #: [REDACTED]
Investigator E-Mail: [REDACTED]
Protocol Title: HUMAN FETAL TISSUE REPOSITORY
Protocol Type: Clinical Research Study
Review Type: Expedited Review

Research/Collaborating Sites Recruitment Information

Site Name	Date Initiated	Activity			Open for Analysis
		Ongoing	Suspended	Closed	
JACOBI MEDICAL CENTER (NBHN)	5/1/1993			Y	
MMC: WEILER DIVISION	1/1/1998			Y	
NORTH CENTRAL BRONX HOSPITAL (NBHN)	4/23/2010			Y	
AECOM: LABORATORY/OFFICE	5/1/1998			Y	

Subject Data

Site Name: JACOBI MEDICAL CENTER (NBHN)

Subjects enrolled since last Progress Report review: 2
Total # of subjects enrolled since project initiated: 2584



Total # of subjects now active on protocol:	0
Number of subjects no longer active on protocol - being followed:	0
Number of subjects who withdrew since last Progress Report:	

Site Name: MMC: WEILER DIVISION

Subjects enrolled since last Progress Report review:	1
Total # of subjects enrolled since project initiated:	51
Total # of subjects now active on protocol:	0
Number of subjects no longer active on protocol - being followed:	0
Number of subjects who withdrew since last Progress Report:	

Site Name: NORTH CENTRAL BRONX HOSPITAL (NBHN)

Subjects enrolled since last Progress Report review:	12
Total # of subjects enrolled since project initiated:	66
Total # of subjects now active on protocol:	0
Number of subjects no longer active on protocol - being followed:	0
Number of subjects who withdrew since last Progress Report:	

Site Name: AECOM: LABORATORY/OFFICE

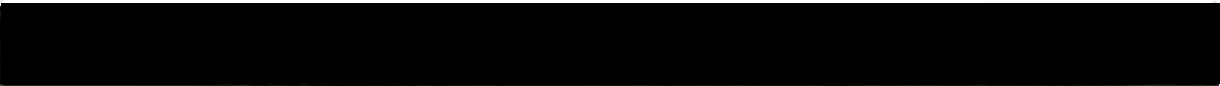
Subjects enrolled since last Progress Report review:	0
Total # of subjects enrolled since project initiated:	0
Total # of subjects now active on protocol:	0
Number of subjects no longer active on protocol - being followed:	0
Number of subjects who withdrew since last Progress Report:	

Internal Adverse Events**Site Name: JACOBI MEDICAL CENTER (NBHN)**

Number of Subjects who died while on protocol, during this Progress Report period:	0
Number of serious adverse events during this Progress Report period:	0
Number of unanticipated adverse events during this Progress Report period:	0

Site Name: MMC: WEILER DIVISION

Number of Subjects who died while on protocol, during this Progress Report period:	0
Number of serious adverse events during this Progress Report period:	0



Number of unanticipated adverse events during this Progress Report period: 0

Site Name: NORTH CENTRAL BRONX HOSPITAL (NBHN)

Number of Subjects who died while on protocol, during this Progress Report period: 0

Number of serious adverse events during this Progress Report period: 0

Number of unanticipated adverse events during this Progress Report period: 0

Site Name: AECOM: LABORATORY/OFFICE

Number of Subjects who died while on protocol, during this Progress Report period: 0

Number of serious adverse events during this Progress Report period: 0

Number of unanticipated adverse events during this Progress Report period: 0

The Principal Investigator has certified that the number of Internal Adverse Events shown above is correct.

Investigator/Key Personnel

<u>Name</u>	<u>COI Required</u>	<u>Payroll</u>	<u>Training Complete</u>	<u>Date</u>
	Y	YU	Y	4/18/2012
	Y	YU	Y	2/14/2013

External Sources of Support

<u>Source</u>	<u>Drugs</u>	<u>Devices</u>	<u>Equipment</u>	<u>Supplies</u>	<u>Funding</u>
None					

Amendments require committee approval. Any amendment not yet submitted must be submitted to the CCI office through the normal amendment process. In addition, the P.I. is required to append to this document a bulleted summary of all amendments approved to date.

New Information

Described below, is any information appearing in the literature since the last progress report of this protocol, especially as the findings relate to risks or benefits to the subject or the significance of the research or the development of new treatment modalities. Note: If the study is monitored by a SMB/DSMB, you may substitute a copy of the current statement from the SMB/DSMB indicating that it has reviewed study-wide adverse events, interim findings and recent literature that may be relevant to the research.

n/a



Described below are the preliminary findings, especially noted are any findings that would affect the risk or benefits to research subjects:

n/a

This new information is **NOT APPLICABLE** to the subjects willingness to continue in this protocol.

Termination of Research

This protocol was completed (no patients are being followed; the data analysis is complete) on 2/28/2015.

As Principal Investigator, my signature on the form with respect to this research project certifies the following:

1. Changes to the research project and/or informed consent form, if any, have been submitted to the CCI/IRB.
2. There have been no known medical, legal, or other complications, including no invasion of an individual's privacy, resulting from this research project.
3. Unless specifically waived by the CCI/IRB, a written informed consent form has been obtained for each subject included in the study. One copy has been given to the subject a second copy is in the subject's chart, and a third copy is on file in my office and is available for review.
4. There have been no new findings or other relevant information that adversely alters the risk/benefit for the research, except as already reported to the CCI/IRB.

ELECTRONICALLY ATTACHED DOCUMENTS

None

Signature of Principal Investigator

2/27/2015

Date

3/4/15
Date

**List of external principal investigators receiving tissue from the hFTR
(1993-042) between 12/1/2014 and 2/28/2015**

Last name	First Name	Organization
		Montreal Neurological Institute
		University of Wisconsin
		NYU School of Medicine
		Rockefeller University
		Yale University School of Medicine
		SUNY Buffalo

EINSTEIN

DEC 7 5 2014

IRB Received

ALBERT EINSTEIN COLLEGE OF MEDICINE
OF YESHIVA UNIVERSITY
Committee on Clinical Investigations
and
MONTEFIORE MEDICAL CENTER
Institutional Review Board

Date Submitted: 11/29/2014 1:02:55 PM

Progress Report: 1993 - 042 - 012
MMC No.: 93-12-432
HHC No.: *01-243
Investigator: [REDACTED]
Investigator Phone #: [REDACTED]
Investigator E-Mail: [REDACTED]
Protocol Title: HUMAN FETAL TISSUE REPOSITORY
Protocol Type: Clinical Research Study
Review Type: Expedited Review

Research/Collaborating Sites Recruitment Information

<u>Site Name</u>	<u>Date Initiated</u>	<u>Activity</u>		
		Ongoing	Suspended	Closed
JACOBI MEDICAL CENTER (NBHN)	5/1/1993	Y		
MMC: WEILER DIVISION	1/1/1998	Y		
NORTH CENTRAL BRONX HOSPITAL (NBHN)	4/23/2010	Y		
AECOM: LABORATORY/OFFICE	5/1/1998	Y		

Subject Data

Site Name: JACOBI MEDICAL CENTER (NBHN)

Subjects enrolled since last Progress Report review: 15
Total # of subjects enrolled since project initiated: 2582



Total # of subjects now active on protocol:	0
Number of subjects no longer active on protocol - being followed:	0
Number of subjects who withdrew since last Progress Report:	0

Site Name: MMC: WEILER DIVISION

Subjects enrolled since last Progress Report review:	6
Total # of subjects enrolled since project initiated:	50
Total # of subjects now active on protocol:	0
Number of subjects no longer active on protocol - being followed:	0
Number of subjects who withdrew since last Progress Report:	0

Site Name: NORTH CENTRAL BRONX HOSPITAL (NBHN)

Subjects enrolled since last Progress Report review:	54
Total # of subjects enrolled since project initiated:	201
Total # of subjects now active on protocol:	0
Number of subjects no longer active on protocol - being followed:	0
Number of subjects who withdrew since last Progress Report:	0

Site Name: AECOM: LABORATORY/OFFICE


Subjects enrolled since last Progress Report review:	0
Total # of subjects enrolled since project initiated:	0
Total # of subjects now active on protocol:	0
Number of subjects no longer active on protocol - being followed:	0
Number of subjects who withdrew since last Progress Report:	0

Internal Adverse Events**Site Name: JACOBI MEDICAL CENTER (NBHN)**

Number of Subjects who died while on protocol, during this Progress Report period:	0
Number of serious adverse events during this Progress Report period:	0
Number of unanticipated adverse events during this Progress Report period:	0

Site Name: MMC: WEILER DIVISION

Number of Subjects who died while on protocol, during this Progress Report period:	0
Number of serious adverse events during this Progress Report period:	0



Number of unanticipated adverse events during this Progress Report period: 0

Site Name: NORTH CENTRAL BRONX HOSPITAL (NBHN)

Number of Subjects who died while on protocol, during this Progress Report period: 0

Number of serious adverse events during this Progress Report period: 0

Number of unanticipated adverse events during this Progress Report period: 0

Site Name: AECOM: LABORATORY/OFFICE

Number of Subjects who died while on protocol, during this Progress Report period: 0

Number of serious adverse events during this Progress Report period: 0

Number of unanticipated adverse events during this Progress Report period: 0

The Principal Investigator has certified that the number of Internal Adverse Events shown above is correct.

Investigator/Key Personnel

<u>Name</u>	<u>COI Required</u>	<u>Payroll</u>	<u>Training Complete</u>	<u>Date</u>
	Y	YU	Y	4/18/2012
	Y	YU	Y	2/14/2013

External Sources of Support

<u>Source</u>	<u>Drugs</u>	<u>Devices</u>	<u>Equipment</u>	<u>Supplies</u>	<u>Funding</u>
None					

Amendments require committee approval. Any amendment not yet submitted must be submitted to the CCI office through the normal amendment process. In addition, the P.I. is required to append to this document a bulleted summary of all amendments approved to date.

New Information

Described below, is any information appearing in the literature since the last progress report of this protocol, especially as the findings relate to risks or benefits to the subject or the significance of the research or the development of new treatment modalities. Note: If the study is monitored by a SMB/DSMB, you may substitute a copy of the current statement from the SMB/DSMB indicating that it has reviewed study-wide adverse events, interim findings and recent literature that may be relevant to the research.

N/A

Described below are the preliminary findings, especially noted are any findings that would affect the risk or benefits to research subjects:

N/A

This new information is **NOT APPLICABLE** to the subjects willingness to continue in this protocol.

Termination of Research

None

As Principal Investigator, my signature on the form with respect to this research project certifies the following:

1. Changes to the research project and/or informed consent form, if any, have been submitted to the CCI/IRB.
2. There have been no known medical, legal, or other complications, including no invasion of an individual's privacy, resulting from this research project.
3. Unless specifically waived by the CCI/IRB, a written informed consent form has been obtained for each subject included in the study. One copy has been given to the subject a second copy is in the subject's chart, and a third copy is on file in my office and is available for review.
4. There have been no new findings or other relevant information that adversely alters the risk/benefit for the research, except as already reported to the CCI/IRB.

ELECTRONICALLY ATTACHED DOCUMENTS

None



Signature of Principal Investigator

11/29/14

Date



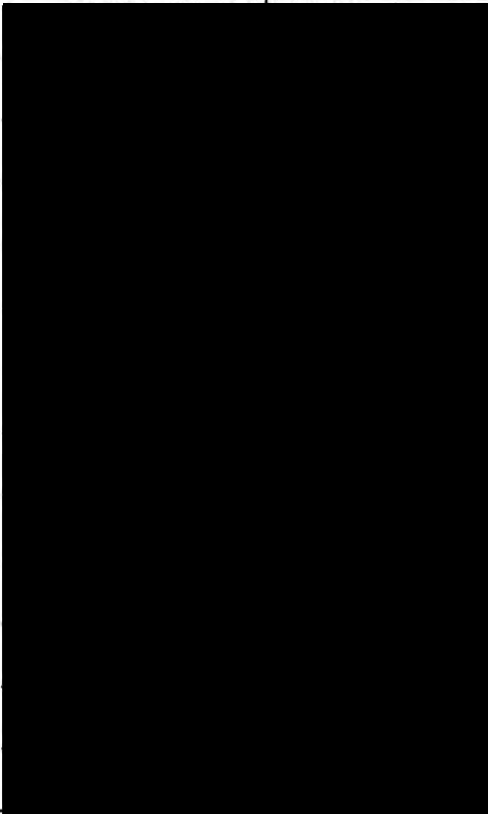
Signature of Reviewer

12/18/14

Date



**List of external principal investigators receiving tissue from the hFTR
(1993-042) between 12/27/2013 and 12/1/2014**

Last name	First Name	Organization
		Montreal Neurological Institute
		University of Wisconsin
		University of California, Irvine
		NYU School of Medicine
		University of Medicine and Dentistry of New Jersey
		Yale University School of Medicine
		Children's National Medical Center
		Yale University
		Rockefeller University
		Yale University School of Medicine
		SUNY Buffalo
		Memorial Sloan Kettering
		Univ. of Connecticut Health Ctr.

JAN - 8 2014

IRB Received

ALBERT EINSTEIN COLLEGE OF MEDICINE
OF YESHIVA UNIVERSITY
Committee on Clinical Investigations
and
MONTEFIORE MEDICAL CENTER
Institutional Review Board

Date Submitted: 12/27/2013 8:48:57 PM

Progress Report: 1993 - 042 - 011
MMC No.: 93-12-432
HHC No.: *01-243
Investigator: [REDACTED]
Investigator Phone #: [REDACTED]
Investigator E-Mail: [REDACTED]
Protocol Title: HUMAN FETAL TISSUE REPOSITORY
Protocol Type: Clinical Research Study
Review Type: Expedited Review

Research/Collaborating Sites Recruitment Information

<u>Site Name</u>	<u>Date Initiated</u>	<u>Activity</u>			Open for Analysis
		Ongoing	Suspended	Closed	
JACOBI MEDICAL CENTER (NBHN)	5/1/1993	Y			
MMC: WEILER DIVISION	1/1/1998	Y			
NORTH CENTRAL BRONX HOSPITAL (NBHN)	4/23/2010	Y			
AECOM: LABORATORY/OFFICE	5/1/1998	Y			

Subject Data**Site Name: JACOBI MEDICAL CENTER (NBHN)**

Subjects enrolled since last Progress Report review: 12
Total # of subjects enrolled since project initiated: 2567

[REDACTED]

Total # of subjects now active on protocol: 0
Number of subjects no longer active on protocol - being followed: 0
Number of subjects who withdrew since last Progress Report: 0

Site Name: MMC: WEILER DIVISION

Subjects enrolled since last Progress Report review: 6
Total # of subjects enrolled since project initiated: 44 ✓
Total # of subjects now active on protocol: 0
Number of subjects no longer active on protocol - being followed: 0
Number of subjects who withdrew since last Progress Report: 0

Site Name: NORTH CENTRAL BRONX HOSPITAL (NBHN)

Subjects enrolled since last Progress Report review: 32 /
Total # of subjects enrolled since project initiated: 147 /
Total # of subjects now active on protocol: 0
Number of subjects no longer active on protocol - being followed: 0
Number of subjects who withdrew since last Progress Report: 0

Site Name: AECOM: LABORATORY/OFFICE

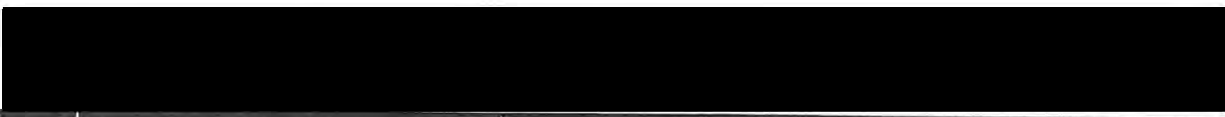
Subjects enrolled since last Progress Report review: 0
Total # of subjects enrolled since project initiated: 0
Total # of subjects now active on protocol: 0
Number of subjects no longer active on protocol - being followed: 0
Number of subjects who withdrew since last Progress Report: 0

Internal Adverse Events**Site Name: JACOBI MEDICAL CENTER (NBHN)**

Number of Subjects who died while on protocol, during this Progress Report period: 0
Number of serious adverse events during this Progress Report period: 0
Number of unanticipated adverse events during this Progress Report period: 0

Site Name: MMC: WEILER DIVISION

Number of Subjects who died while on protocol, during this Progress Report period: 0
Number of serious adverse events during this Progress Report period: 0



Number of unanticipated adverse events during this Progress Report period: 0

Site Name: NORTH CENTRAL BRONX HOSPITAL (NBHN)

Number of Subjects who died while on protocol, during this Progress Report period: 0

Number of serious adverse events during this Progress Report period: 0

Number of unanticipated adverse events during this Progress Report period: 0

Site Name: AECOM: LABORATORY/OFFICE

Number of Subjects who died while on protocol, during this Progress Report period: 0

Number of serious adverse events during this Progress Report period: 0

Number of unanticipated adverse events during this Progress Report period: 0

The Principal Investigator has certified that the number of Internal Adverse Events shown above is correct.

Investigator/Key Personnel

<u>Name</u>	<u>COI Required</u>	<u>Payroll</u>	<u>Training Complete</u>	<u>Date</u>
	Y	YU	Y	4/18/2012
	Y	YU	Y	2/14/2013

External Sources of Support

<u>Source</u>	<u>Drugs</u>	<u>Devices</u>	<u>Equipment</u>	<u>Supplies</u>	<u>Funding</u>
None					

Amendments require committee approval. Any amendment not yet submitted must be submitted to the CCI office through the normal amendment process. In addition, the P.I. is required to append to this document a bulleted summary of all amendments approved to date.

New Information

Described below, is any information appearing in the literature since the last progress report of this protocol, especially as the findings relate to risks or benefits to the subject or the significance of the research or the development of new treatment modalities. Note: If the study is monitored by a SMB/DSMB, you may substitute a copy of the current statement from the SMB/DSMB indicating that it has reviewed study-wide adverse events, interim findings and recent literature that may be relevant to the research.

N/A

Described below are the preliminary findings, especially noted are any findings that would affect the risk or benefits to research subjects:

N/A

This new information is **NOT APPLICABLE** to the subjects willingness to continue in this protocol.

Termination of Research

None

As Principal Investigator, my signature on the form with respect to this research project certifies the following:

1. Changes to the research project and/or informed consent form, if any, have been submitted to the CCI/IRB.
2. There have been no known medical, legal, or other complications, including no invasion of an individual's privacy, resulting from this research project.
3. Unless specifically waived by the CCI/IRB, a written informed consent form has been obtained for each subject included in the study. One copy has been given to the subject a second copy is in the subject's chart, and a third copy is on file in my office and is available for review.
4. There have been no new findings or other relevant information that adversely alters the risk/benefit for the research, except as already reported to the CCI/IRB.

ELECTRONICALLY ATTACHED DOCUMENTS

None

Signature of Principal Investigator


1/8/14

Date

1/17/14

Date

**List of external principal investigators receiving tissue from the hFTR
(1993-042) between 02/26/2013 and 12/31/2013**

Last name	First Name	Organization
		Montreal Neurological Institute
		University of Wisconsin
		University of California, Irvine
		University of Medicine and Dentistry of New Jersey
		Yale University School of Medicine
		Rockefeller University
		Yale University School of Medicine
		SUNY Buffalo
		Memorial Sloan Kettering

FEB 28 2013

IRB Received

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Institutional Review Board

Date Submitted: 2/25/2013 5:53:09 PM

Progress Report: 1993 - 042 - 010
MMC No.: 93-12-432
HHC No.: *01-243
Investigator: [REDACTED]
Investigator Phone #: [REDACTED]
Investigator E-Mail: [REDACTED]
Protocol Title: HUMAN FETAL TISSUE REPOSITORY
Protocol Type: Clinical Research Study
Review Type: Expedited Review

Research/Collaborating Sites Recruitment Information

<u>Site Name</u>	<u>Date Initiated</u>	<u>Activity</u>			Open for Analysis
		Ongoing	Suspended	Closed	
JACOBI MEDICAL CENTER (NBHN)	5/1/1993	Y			
MMC: WEILER DIVISION	1/1/1998	Y			
NORTH CENTRAL BRONX HOSPITAL (NBHN)	4/23/2010	Y			
AECOM: LABORATORY/OFFICE	5/1/1998	Y			

Subject Data

Site Name: JACOBI MEDICAL CENTER (NBHN)

Subjects enrolled since last Progress Report review:
Total # of subjects enrolled since project initiated:

18
2555 ✓

Total # of subjects now active on protocol: 0
Number of subjects no longer active on protocol - being followed: 0
Number of subjects who withdrew since last Progress Report: 0

Site Name: MMC: WEILER DIVISION

Subjects enrolled since last Progress Report review: 10
Total # of subjects enrolled since project initiated: 38 ✓
Total # of subjects now active on protocol: 0
Number of subjects no longer active on protocol - being followed: 0
Number of subjects who withdrew since last Progress Report: 0

Site Name: NORTH CENTRAL BRONX HOSPITAL (NBHN)

Subjects enrolled since last Progress Report review: 40 ✓
Total # of subjects enrolled since project initiated: 115 ✓
Total # of subjects now active on protocol: 0
Number of subjects no longer active on protocol - being followed: 0
Number of subjects who withdrew since last Progress Report: 0

Site Name: AECOM: LABORATORY/OFFICE


Subjects enrolled since last Progress Report review: 0
Total # of subjects enrolled since project initiated: 0
Total # of subjects now active on protocol: 0
Number of subjects no longer active on protocol - being followed: 0
Number of subjects who withdrew since last Progress Report: 0

Internal Adverse Events**Site Name: JACOBI MEDICAL CENTER (NBHN)**

Number of Subjects who died while on protocol, during this Progress Report period: 0
Number of serious adverse events during this Progress Report period: 0
Number of unanticipated adverse events during this Progress Report period: 0

Site Name: MMC: WEILER DIVISION

Number of Subjects who died while on protocol, during this Progress Report period: 0
Number of serious adverse events during this Progress Report period: 0



Number of unanticipated adverse events during this Progress Report period: 0

Site Name: NORTH CENTRAL BRONX HOSPITAL (NBHN)

Number of Subjects who died while on protocol, during this Progress Report period: 0

Number of serious adverse events during this Progress Report period: 0

Number of unanticipated adverse events during this Progress Report period: 0

Site Name: AECOM: LABORATORY/OFFICE

Number of Subjects who died while on protocol, during this Progress Report period: 0

Number of serious adverse events during this Progress Report period: 0

Number of unanticipated adverse events during this Progress Report period: 0

The Principal Investigator has certified that the number of Internal Adverse Events shown above is correct.

Investigator/Key Personnel

<u>Name</u>	<u>COI Required</u>	<u>Payroll</u>	<u>Training Complete</u>	<u>Date</u>
	Y	YU	Y	4/18/2012
	Y	YU	Y	2/14/2013

External Sources of Support

<u>Source</u>	<u>Drugs</u>	<u>Devices</u>	<u>Equipment</u>	<u>Supplies</u>	<u>Funding</u>
None					

Amendments require committee approval. Any amendment not yet submitted must be submitted to the CCI office through the normal amendment process. In addition, the P.I. is required to append to this document a bulleted summary of all amendments approved to date.

New Information

Described below, is any information appearing in the literature since the last progress report of this protocol, especially as the findings relate to risks or benefits to the subject or the significance of the research or the development of new treatment modalities. Note: If the study is monitored by a SMB/DSMB, you may substitute a copy of the current statement from the SMB/DSMB indicating that it has reviewed study-wide adverse events, interim findings and recent literature that may be relevant to the research.

N/A

Described below are the preliminary findings, especially noted are any findings that would affect the risk or benefits to research subjects:

N/A

This new information is **NOT APPLICABLE** to the subjects willingness to continue in this protocol.

Termination of Research

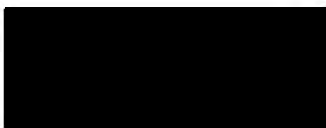
None

As Principal Investigator, my signature on the form with respect to this research project certifies the following:

1. Changes to the research project and/or informed consent form, if any, have been submitted to the CCI/IRB.
2. There have been no known medical, legal, or other complications, including no invasion of an individual's privacy, resulting from this research project.
3. Unless specifically waived by the CCI/IRB, a written informed consent form has been obtained for each subject included in the study. One copy has been given to the subject a second copy is in the subject's chart, and a third copy is on file in my office and is available for review.
4. There have been no new findings or other relevant information that adversely alters the risk/benefit for the research, except as already reported to the CCI/IRB.

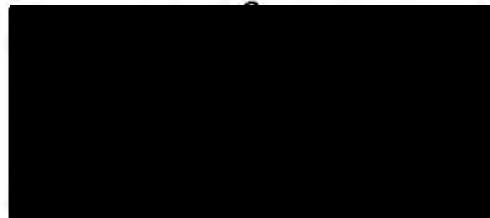
ELECTRONICALLY ATTACHED DOCUMENTS

None



Signature of Principal Investigator

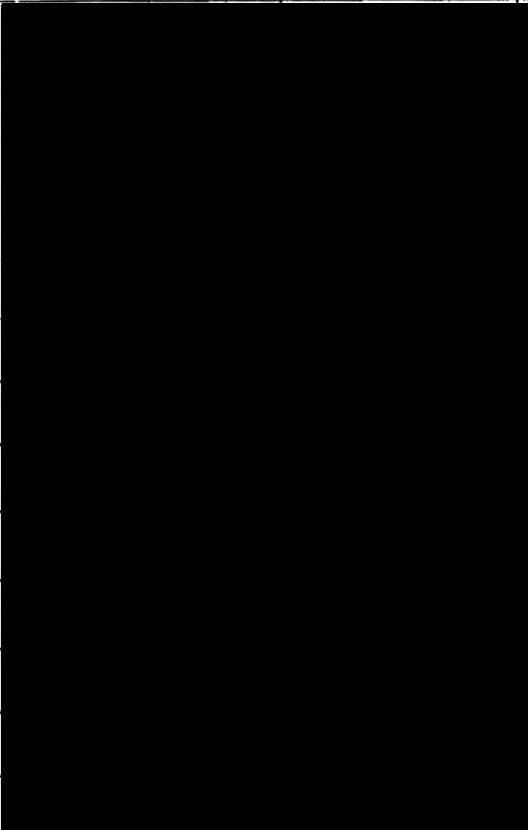
2/28/13
Date



3/8/13
Date



**List of external principal investigators receiving tissue from the hFTR
(1993-042) between 03/26/2012 and 02/25/2013**

Last name	First Name	Organization
		Montreal Neurological Institute
		University of Wisconsin
		NYU School of Medicine
		Memorial Sloan-Kettering Cancer Center
		University of Medicine and Dentistry of New Jersey
		Yale University School of Medicine
		Wayne State Univ. School of Med.
		Wayne State Univ. School of Med.
		Johns Hopkins
		Rockefeller University
		Yale University School of Medicine
		SUNY Buffalo
		University of Virginia

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Institutional Review Board

Date Submitted: 3/26/2012 11:03:28 AM

Progress Report: 1993 - 042 - 009
MMC No.: 93-12-432
HHC No.: *01-243
Investigator: [REDACTED]
Investigator Phone #: [REDACTED]
Investigator E-Mail: [REDACTED]
Protocol Title: HUMAN FETAL TISSUE REPOSITORY
Protocol Type: Clinical Research Study
Review Type: Expedited Review

Research/Collaborating Sites Recruitment Information

<u>Site Name</u>	<u>Date Initiated</u>	<u>Activity</u>			Open for Analysis
		Ongoing	Suspended	Closed	
JACOBI MEDICAL CENTER (NBHN)	5/1/1993	Y			
MMC: WEILER DIVISION	1/1/1998	Y			
NORTH CENTRAL BRONX HOSPITAL (NBHN)	4/23/2010	Y			
AECOM: LABORATORY/OFFICE	5/1/1998	Y			

Subject Data

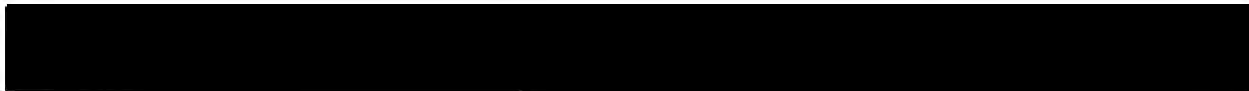
Site Name: JACOBI MEDICAL CENTER (NBHN)

Subjects enrolled since last Progress Report review:

43

Total # of subjects enrolled since project initiated:

2537 ✓



Total # of subjects now active on protocol: 0
Number of subjects no longer active on protocol - being followed: 0
Number of subjects who withdrew since last Progress Report: 0

Site Name: MMC: WEILER DIVISION

Subjects enrolled since last Progress Report review: 1
Total # of subjects enrolled since project initiated: 28 ✓
Total # of subjects now active on protocol: 0
Number of subjects no longer active on protocol - being followed: 0
Number of subjects who withdrew since last Progress Report: 0

Site Name: NORTH CENTRAL BRONX HOSPITAL (NBHN)

Subjects enrolled since last Progress Report review: 34
Total # of subjects enrolled since project initiated: 75 ✓
Total # of subjects now active on protocol: 0
Number of subjects no longer active on protocol - being followed: 0
Number of subjects who withdrew since last Progress Report: 0

Site Name: AECOM: LABORATORY/OFFICE


Subjects enrolled since last Progress Report review: 0
Total # of subjects enrolled since project initiated: 0
Total # of subjects now active on protocol: 0
Number of subjects no longer active on protocol - being followed: 0
Number of subjects who withdrew since last Progress Report: 0

Internal Adverse Events**Site Name: JACOBI MEDICAL CENTER (NBHN)**

Number of Subjects who died while on protocol, during this Progress Report period: 0
Number of serious adverse events during this Progress Report period: 0
Number of unanticipated adverse events during this Progress Report period: 0

Site Name: MMC: WEILER DIVISION

Number of Subjects who died while on protocol, during this Progress Report period: 0
Number of serious adverse events during this Progress Report period: 0



Number of unanticipated adverse events during this Progress Report period: 0

Site Name: NORTH CENTRAL BRONX HOSPITAL (NBHN)

Number of Subjects who died while on protocol, during this Progress Report period: 0

Number of serious adverse events during this Progress Report period: 0

Number of unanticipated adverse events during this Progress Report period: 0

Site Name: AECOM: LABORATORY/OFFICE

Number of Subjects who died while on protocol, during this Progress Report period: 0

Number of serious adverse events during this Progress Report period: 0

Number of unanticipated adverse events during this Progress Report period: 0

The Principal Investigator has certified that the number of Internal Adverse Events shown above is correct.

Investigator/Key Personnel

<u>Name</u>	<u>COI Required</u>	<u>Payroll</u>	<u>Training Complete</u>	<u>Date</u>
	Y	YU	Y	6/1/2007
	Y	YU	Y	2/23/2012

External Sources of Support

<u>Source</u>	<u>Drugs</u>	<u>Devices</u>	<u>Equipment</u>	<u>Supplies</u>	<u>Funding</u>
None					

Amendments require committee approval. Any amendment not yet submitted must be submitted to the CCI office through the normal amendment process. In addition, the P.I. is required to append to this document a bulleted summary of all amendments approved to date.

New Information

Described below, is any information appearing in the literature since the last progress report of this protocol, especially as the findings relate to risks or benefits to the subject or the significance of the research or the development of new treatment modalities. Note: If the study is monitored by a SMB/DSMB, you may substitute a copy of the current statement from the SMB/DSMB indicating that it has reviewed study-wide adverse events, interim findings and recent literature that may be relevant to the research.

N/A

Described below are the preliminary findings, especially noted are any findings that would affect the risk or benefits to research subjects:

N/A

This new information is **NOT APPLICABLE** to the subjects willingness to continue in this protocol.

Termination of Research

None

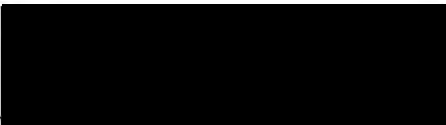
As Principal Investigator, my signature on the form with respect to this research project certifies the following:

1. Changes to the research project and/or informed consent form, if any, have been submitted to the CCI/IRB.
2. There have been no known medical, legal, or other complications, including no invasion of an individual's privacy, resulting from this research project.
3. Unless specifically waived by the CCI/IRB, a written informed consent form has been obtained for each subject included in the study. One copy has been given to the subject a second copy is in the subject's chart, and a third copy is on file in my office and is available for review.
4. There have been no new findings or other relevant information that adversely alters the risk/benefit for the research, except as already reported to the CCI/IRB.

The following exceptions to the four points above have been entered by the Investigator:
no exceptions

ELECTRONICALLY ATTACHED DOCUMENTS

None



Signature of Principal Investigator

3/26/2012
Date

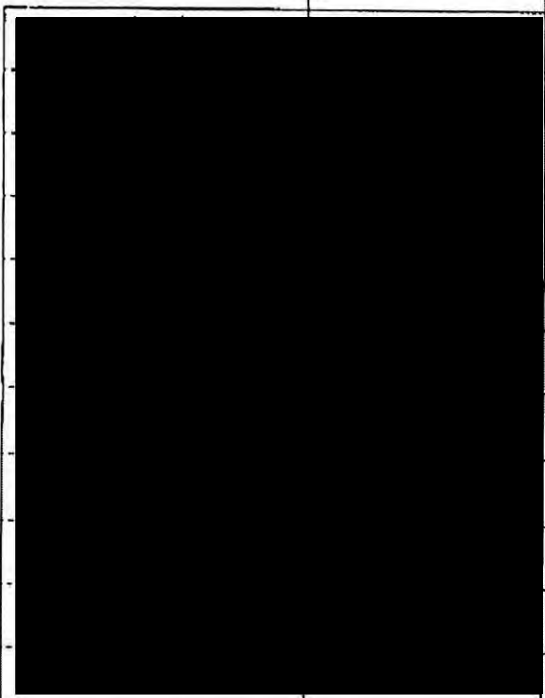


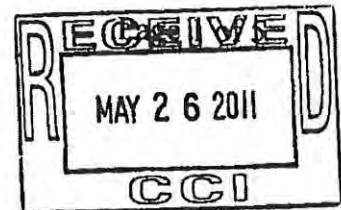
Sig

4/20/2012
Date



**List of external principal investigators receiving tissue from the hFTR
(1993-042) between 05/12/2011 and 03/26/2012**

Last name	First Name	Organization
		Montreal Neurological Institute
		University of California, Irvine
		NYU School of Medicine
		Memorial Sloan-Kettering Cancer Center
		Yale University School of Medicine
		Yale University School of Medicine
		Wayne State Univ. School of Med.
		Wayne State Univ. School of Med.
		Rockefeller University
		Yale University School of Medicine
		University of Virginia



**ALBERT EINSTEIN COLLEGE OF MEDICINE
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Institutional Review Board**

Date Submitted: 5/12/2011 12:09:39 PM

Progress Report: 1993 - 042 - 008
MMC No.: 93-12-432
HHC No.: *01-243
Investigator: [REDACTED]
Investigator Phone #: [REDACTED]
Investigator E-Mail: [REDACTED]
Protocol Title: HUMAN FETAL TISSUE REPOSITORY
Protocol Type: Clinical Research Study
Review Type: Expedited Review

Research/Collaborating Sites Recruitment Information

<u>Site Name</u>	<u>Date Initiated</u>	<u>Activity</u>			
		Ongoing	Suspended	Closed	Open for Analysis
JACOBI MEDICAL CENTER (NBHN)	5/1/1993	Y			
MMC: WEILER DIVISION	1/1/1998	Y			
NORTH CENTRAL BRONX HOSPITAL (NBHN)	4/23/2010	Y			
AECOM: LABORATORY/OFFICE	5/1/1998	Y			



Subject Data**Site Name: JACOBI MEDICAL CENTER (NBHN)**

Subjects enrolled since last Progress Report review:	43
Total # of subjects enrolled since project initiated:	2494 ✓
Total # of subjects now active on protocol:	0
Number of subjects no longer active on protocol - being followed:	0
Number of subjects who withdrew since last Progress Report:	0

Site Name: MMC: WEILER DIVISION


Subjects enrolled since last Progress Report review:	1 ✓
Total # of subjects enrolled since project initiated:	27 ✓
Total # of subjects now active on protocol:	0
Number of subjects no longer active on protocol - being followed:	0
Number of subjects who withdrew since last Progress Report:	0

Site Name: NORTH CENTRAL BRONX HOSPITAL (NBHN)

Subjects enrolled since last Progress Report review:	34 ✓
Total # of subjects enrolled since project initiated:	41 ✓
Total # of subjects now active on protocol:	0
Number of subjects no longer active on protocol - being followed:	0
Number of subjects who withdrew since last Progress Report:	0

Site Name: AECOM: LABORATORY/OFFICE

Subjects enrolled since last Progress Report review:	0
Total # of subjects enrolled since project initiated:	0
Total # of subjects now active on protocol:	0
Number of subjects no longer active on protocol - being followed:	0
Number of subjects who withdrew since last Progress Report:	0



Internal Adverse Events**Site Name: JACOBI MEDICAL CENTER (NBHN)**

Number of Subjects who died while on protocol, during this Progress Report period: 0

Number of serious adverse events during this Progress Report period: 0

Number of unanticipated adverse events during this Progress Report period: 0

Site Name: MMC: WEILER DIVISION

Number of Subjects who died while on protocol, during this Progress Report period: 0

Number of serious adverse events during this Progress Report period: 0

Number of unanticipated adverse events during this Progress Report period: 0

Site Name: NORTH CENTRAL BRONX HOSPITAL (NBHN)

Number of Subjects who died while on protocol, during this Progress Report period: 0

Number of serious adverse events during this Progress Report period: 0

Number of unanticipated adverse events during this Progress Report period: 0


Site Name: AECOM: LABORATORY/OFFICE

Number of Subjects who died while on protocol, during this Progress Report period: 0


Number of serious adverse events during this Progress Report period: 0

Number of unanticipated adverse events during this Progress Report period: 0

The Principal Investigator has certified that the number of Internal Adverse Events shown above is correct.



Investigator/Key Personnel

<u>Name</u>	<u>COI Required</u>	<u>Payroll</u>	<u>Training Complete</u>	<u>Date</u>
	Y	YU	Y	6/1/2007
	Y	YU	Y	5/7/2007

External Sources of Support

<u>Source</u>	<u>Drugs</u>	<u>Devices</u>	<u>Equipment</u>	<u>Supplies</u>	<u>Funding</u>
None					

Amendments require committee approval. Any amendment not yet submitted must be submitted to the CCI office through the normal amendment process. In addition, the P.I. is required to append to this document a bulleted summary of all amendments approved to date.

New Information

Described below, is any information appearing in the literature since the last progress report of this protocol, especially as the findings relate to risks or benefits to the subject or the significance of the research or the development of new treatment modalities. Note: If the study is monitored by a SMB/DSMB, you may substitute a copy of the current statement from the SMB/DSMB indicating that it has reviewed study-wide adverse events, interim findings and recent literature that may be relevant to the research.

N/A

Described below are the preliminary findings, especially noted are any findings that would affect the risk or benefits to research subjects:

N/A

This new information is **NOT APPLICABLE** to the subjects willingness to continue in this protocol.

Termination of Research

None

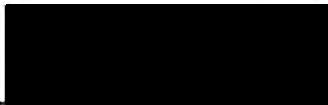
As Principal Investigator, my signature on the form with respect to this research project certifies the following:



1. Changes to the research project and/or informed consent form, if any, have been submitted to the CCI/IRB.
2. There have been no known medical, legal, or other complications, including no invasion of an individual's privacy, resulting from this research project.
3. Unless specifically waived by the CCI/IRB, a written informed consent form has been obtained for each subject included in the study. One copy has been given to the subject a second copy is in the subject's chart, and a third copy is on file in my office and is available for review.
4. There have been no new findings or other relevant information that adversely alters the risk/benefit for the research, except as already reported to the CCI/IRB.

ELECTRONICALLY ATTACHED DOCUMENTS

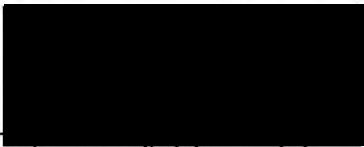
None



Signature of Principal Investigator

5/12/11

Date



Signature of Reviewer

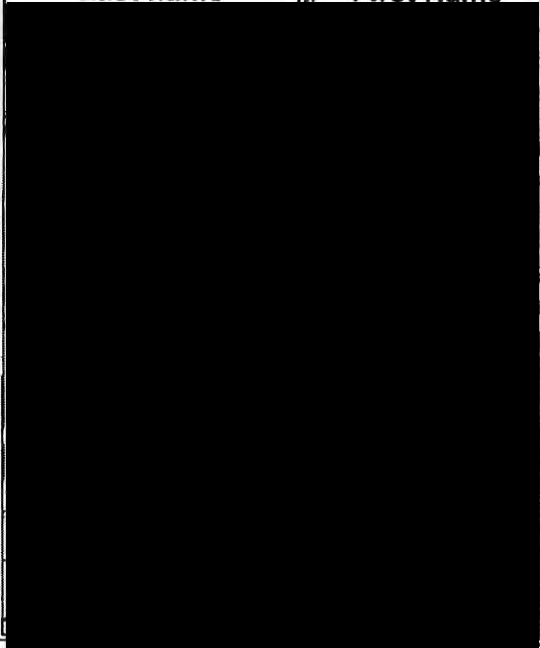
6/2/11

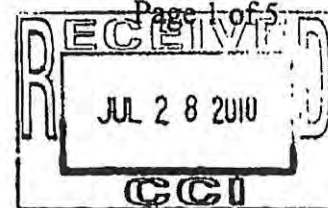
Date



1993-042

List of non-Einstein principal investigators receiving tissue from the hFTR users between 07/20/2010 and 05/12/2011

Last name	First Name	Organization
		Montreal Neurological Institute
		University of California, Irvine
		NYU School of Medicine
		Memorial Sloan-Kettering Cancer Center
		Yale University School of Medicine
		Yale University School of Medicine
		Wayne State Univ. School of Med.
		Wayne State Univ. School of Med.
		Rockefeller University
		Yale University School of Medicine
		Univ. of Connecticut Health Ctr.



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Committee on Clinical Investigations
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Institutional Review Board

Date Submitted: 7/20/2010 1:18:26 PM

Progress Report: 1993 - 042 - 007
MMC No.: 93-12-432
HHC No.: *01-243
Investigator: [REDACTED]
Investigator Phone #: [REDACTED]
Investigator E-Mail: [REDACTED]
Protocol Title: HUMAN FETAL TISSUE REPOSITORY
Protocol Type: Clinical Research Study
Review Type: Expedited Review

Research/Collaborating Sites Recruitment Information

<u>Site Name</u>	<u>Date Initiated</u>	<u>Activity</u>			
		Ongoing	Suspended	Closed	Open for Analysis
JACOBI MEDICAL CENTER (NBHN)	5/1/1993	Y			
MMC: WEILER DIVISION	1/1/1998	Y			
NORTH CENTRAL BRONX HOSPITAL (NBHN)	4/23/2010	Y			
AECOM: LABORATORY/OFFICE	5/1/1998	Y			

Subject Data**Site Name: JACOBI MEDICAL CENTER (NBHN)**

Subjects enrolled since last Progress Report review:	93
Total # of subjects enrolled since project initiated:	2451 ✓
Total # of subjects now active on protocol:	0
Number of subjects no longer active on protocol - being followed:	0
Number of subjects who withdrew since last Progress Report:	0

Site Name: MMC: WEILER DIVISION


Subjects enrolled since last Progress Report review:	1
Total # of subjects enrolled since project initiated:	26 ✓
Total # of subjects now active on protocol:	0
Number of subjects no longer active on protocol - being followed:	0
Number of subjects who withdrew since last Progress Report:	0

Site Name: NORTH CENTRAL BRONX HOSPITAL (NBHN)

Subjects enrolled since last Progress Report review:	7
Total # of subjects enrolled since project initiated:	7 ✓
Total # of subjects now active on protocol:	0
Number of subjects no longer active on protocol - being followed:	0
Number of subjects who withdrew since last Progress Report:	0

Site Name: AECOM: LABORATORY/OFFICE

Subjects enrolled since last Progress Report review:	0
Total # of subjects enrolled since project initiated:	0
Total # of subjects now active on protocol:	0
Number of subjects no longer active on protocol - being followed:	0
Number of subjects who withdrew since last Progress Report:	0



Internal Adverse Events**Site Name: JACOBI MEDICAL CENTER (NBHN)**

Number of Subjects who died while on protocol, during this Progress Report period: 0

Number of serious adverse events during this Progress Report period: 0

Number of unanticipated adverse events during this Progress Report period: 0

Site Name: MMC: WEILER DIVISION

Number of Subjects who died while on protocol, during this Progress Report period: 0

Number of serious adverse events during this Progress Report period: 0

Number of unanticipated adverse events during this Progress Report period: 0

Site Name: NORTH CENTRAL BRONX HOSPITAL (NBHN)

Number of Subjects who died while on protocol, during this Progress Report period: 0

Number of serious adverse events during this Progress Report period: 0

Number of unanticipated adverse events during this Progress Report period: 0


Site Name: AECOM: LABORATORY/OFFICE

Number of Subjects who died while on protocol, during this Progress Report period: 0

Number of serious adverse events during this Progress Report period: 0

Number of unanticipated adverse events during this Progress Report period: 0

The Principal Investigator has certified that the number of Internal Adverse Events shown above is correct.



Investigator/Key Personnel

<u>Name</u>	<u>COI Required</u>	<u>Payroll</u>	<u>Training Complete</u>	<u>Date</u>
	Y	YU	Y	6/1/2007
	Y	YU	Y	5/7/2007

External Sources of Support

<u>Source</u>	<u>Drugs</u>	<u>Devices</u>	<u>Equipment</u>	<u>Supplies</u>	<u>Funding</u>
None					

Amendments require committee approval. Any amendment not yet submitted must be submitted to the CCI office through the normal amendment process. In addition, the P.I. is required to append to this document a bulleted summary of all amendments approved to date.

New Information

Described below, is any information appearing in the literature since the last progress report of this protocol, especially as the findings relate to risks or benefits to the subject or the significance of the research or the development of new treatment modalities. Note: If the study is monitored by a SMB/DSMB, you may substitute a copy of the current statement from the SMB/DSMB indicating that it has reviewed study-wide adverse events, interim findings and recent literature that may be relevant to the research.

N/A

Described below are the preliminary findings, especially noted are any findings that would affect the risk or benefits to research subjects:

N/A

This new information is **NOT APPLICABLE** to the subjects willingness to continue in this protocol.

Termination of Research

None

As Principal Investigator, my signature on the form with respect to this research project certifies the following:

1. Changes to the research project and/or informed consent form, if any, have been submitted to the CCI/IRB.
2. There have been no known medical, legal, or other complications, including no invasion of an individual's privacy, resulting from this research project.
3. Unless specifically waived by the CCI/IRB, a written informed consent form has been obtained for each subject included in the study. One copy has been given to the subject a second copy is in the subject's chart, and a third copy is on file in my office and is available for review.
4. There have been no new findings or other relevant information that adversely alters the risk/benefit for the research, except as already reported to the CCI/IRB.

The following exceptions to the four points above have been entered by the Investigator:

N/A

ELECTRONICALLY ATTACHED DOCUMENTS

None

Signature of Principal Investigator

Date

7/20/2010

Signature of Reviewer

Date

8/1/10

Exhibit 5.56

December 15, 2010

Dear Colleague:

Thank you for your inquiry about receiving specimens from Human Fetal Tissue Repository [hFTR] of the Albert Einstein College of Medicine [AECOM]. In order to expedite filling your request, please provide the hFTR with following information:

- An abstract and brief summary of your IRB-approved human experimentation protocol. Clearly state which tissues you will use for your study and why you must use human tissues -- and human *fetal* tissues in particular.
 - A copy of your local IRB approval letter. When filling out your IRB application, be sure to state that you will be receiving tissue from the AECOM hFTR.
 - Please read and sign the enclosed *Risk Handling Statement*.
 - Please read and sign the *Non-Transplant Human Fetal Tissue Request Form*. Note that the appropriate administrative official of your institution (the "Recipient") and must also sign this agreement. These agreements emphasize several issues:
1. You are responsible for understanding and adhering to appropriate safety standards for the protection of yourself and the laboratory personnel under your supervision who will be handling the human tissue.
 2. Unless you are licensed to do so by New York State, you may not distribute any portion of the tissue disbursement or products derived therefrom to colleagues or other investigators. You must refer all such inquiries to the AECOM hFTR.
 3. You have agreed to provide specific acknowledgment of the AECOM hFTR in any publications related to the use of these tissues or products derived therefrom.

All requests undergo a review process in the order in which they are received. Upon approval, the tissue order will be shipped to your location as such samples become available to the hFTR. Shipping costs, if applicable, are assumed by the recipient. The AECOM hFTR ordinarily ships specimens via FedEx. We therefore require that you provide us with your FedEx account number.

Please feel free to contact me regarding the status of your request for tissue or with any other questions that you may have. The AECOM hFTR is pleased to be able to provide this specialized service to help facilitate your research program.

Sincerely,

[Redacted Signature Block]

Exhibit 5.57



Albert Einstein College of Medicine
OF YESHIVA UNIVERSITY

Albert Einstein College of Medicine of Yeshiva University

Non-Transplant Human Fetal Tissue Request Form

All terms below are defined in the Uniform Biological Material Transfer Agreement published in the Federal Register on March 8, 1995.

1. The BIOLOGICAL MATERIAL, herein, is made available as a service to the research community and is for non-clinical use only.
2. The BIOLOGICAL MATERIAL will be used for teaching and not-for-profit research purposes only and not for any commercial purpose whatsoever.
3. The BIOLOGICAL MATERIAL will not be further distributed to others without the written consent of the Albert Einstein College of Medicine (herein PROVIDER). The RECIPIENT shall refer any request for the BIOLOGICAL MATERIAL to the PROVIDER. To the extent supplies are available, the Human Fetal Tissue Repository will attempt to make the BIOLOGICAL MATERIAL available, under a separate Human Fetal Tissue Request, to other academic scientists who wish to replicate the RECIPIENT SCIENTIST's research.
4. The RECIPIENT agrees to acknowledge the source of the BIOLOGICAL MATERIAL in any publications reporting use of it.
5. Any BIOLOGICAL MATERIAL delivered pursuant to this Human Fetal Tissue Request is understood to be experimental in nature and may have hazardous properties. The PROVIDER MAKES NO REPRESENTATIONS AND EXTENDS NO WARRANTIES OF ANY KIND, EITHER EXPRESS OR IMPLIED. THERE ARE NO EXPRESS OR IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, OR THAT THE USE OF THE BIOLOGICAL MATERIAL WILL NOT INFRINGE ANY PATENT, COPYRIGHT, TRADEMARK, OR OTHER PROPRIETARY RIGHTS. Except to the extent prohibited by law, the RECIPIENT assumes all liability for damages that may arise from its use, storage or disposal of BIOLOGICAL MATERIAL. The PROVIDER will not be liable to the RECIPIENT for any loss, claim or demand made by the RECIPIENT, or made against the RECIPIENT by any other party, due to or arising from the use of the BIOLOGICAL MATERIAL by the RECIPIENT.
6. The RECIPIENT agrees to use the BIOLOGICAL MATERIAL in compliance with all applicable statutes and regulations, including, but not limited to those relating to research involving the use of human and animal subjects or recombinant DNA.
7. The RECIPIENT will pay a transmittal fee of \$250 per sample to reimburse the PROVIDER for its preparation and distribution costs.
8. The RECIPIENT affirms that they have received all necessary approvals for their use of material, including but not limited to RECIPIENT IRB, IACUC, and Biosafety, as applicable.
9. Any changes in the protocol including requests for: additional tissues, for tissues from donors with specific clinical pathologies, or for abortuses with specific anomalies must receive RECIPIENT IRB as well as PROVIDER IRB preapproval.
10. The RECIPIENT and the RECIPIENT SCIENTIST should sign two copies of this form and return both signed copies to the hFTR Director. One fully executed copy will be returned to the RECIPIENT.

BIOLOGICAL MATERIAL

Type of Fetal Tissue	Quantity	Age Range

IRB APPROVAL/EXEMPTION

IRB Protocol #: _____ IRB Approval Date: _____

Protocol Title: _____

RECIPIENT SCIENTIST

Institution: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Name, Recipient Scientist

Academic Title, Recipient Scientist

Signature, Recipient Scientist

Date

RECIPIENT

Institution: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Name, Authorized Official

Title, Authorized Official

Signature, Authorized Official

Date

REQUIRED APPROVALS

Name, Einstein hFTR Director

Signature, Einstein hFTR Director

Date

Name, Authorized Official

Title, Authorized Official

Signature, Authorized Official

Date

Exhibit 6.1

Applies To:
Department: Obstetrics and Gynecology
Revised:
Effective Date: _____

Title: Second Trimester Pregnancy Termination, D&E and induction of labor		Policy	
Patient Age Group:	(X) N/A	() All Ages	() Newborns () Pediatric () Adult

POLICY STATEMENT

This protocol is for management of pregnancy termination in the second trimester (13-25 weeks). Most women who undergo induced abortion or miscarriage management from 13-16 weeks choose dilatation and evacuation (D&E). Beyond 16-17 weeks, women should generally be given a choice between induction of labor vs. D&E although it appears that complications are more common with induction of labor than with D&E (1).

ADMISSION CONSIDERATIONS

- Prior to the procedure it is the physician's responsibility to:
 - provide the patient with a full explanation of both D&E and labor induction with risks and benefits of each.
 - obtain specific informed consent form for pregnancy termination and sign the informed consent document.
- All women will undergo ultrasound evaluation for gestational age assessment.
- At or beyond 24-25 weeks, pregnancy termination will be considered on a case-by-case basis for maternal or fetal reasons.
- Terminations for genetic/maternal health indications and for fetal demise are routinely scheduled on L&D. Such cases should be scheduled by calling the L&D front desk scheduler.
- The Family Planning Service will schedule and staff D&E procedures. A faculty from Family Planning is available 24-7 through the Reproductive Health PALS (272-2000) line. In the case of induction of labor, family planning or the primary physician with the L&D team will manage the patient.
- A memory box may be made for women who desire footprints, etc. whether the termination occurs by D&E or by induction of labor. Grief counseling is available for women.

DOCUMENTATION

The medical record should reflect the diagnosis and counseling for pregnancy termination. In addition, a dated and timed procedure note will describe procedures performed in the case of D&E, and, in the case of induction, the time of passage of the fetus and placenta, estimated blood loss, and any complications.

METHOD

- D&E
 - Most women choose D&E when it is offered, although some women choose induction of labor for personal reasons (e.g., in order to hold the baby) or for genetic studies. Studies

Title: _____
Owner: _____
Effective Date: _____
Doc. # _____

suggest that overall, D&E is safer, resulting in fewer D&Cs for retained placenta and less infectious morbidity.

- a. For D&E, contact the Family Planning attending on call via PALS who will arrange the procedure and placement of laminaria in preparation for the procedure.
- b. If upon presentation to L&D for admission, fetal heart beat is present and feticide is planned/desired, Family Planning or MFM should be consulted. Feticide may be accomplished with intracardiac KCl or with intra-fetal or intra-amniotic digoxin per a separate SOP (Fetal intracardiac KCL or intrafetal/intra-amniotic digoxin injection).

2. Labor induction termination

- Candidates for labor induction abortion in the 2nd trimester include genetic terminations or those for health of the woman who choose not to undergo D&E. The combination of mifepristone and misoprostol is the most effective and fastest. Use of mifepristone reduces the induction to abortion time by 40-50%.

3. Women with pregnancy from 12-24 weeks:

- Mifepristone tablet, 200 mg orally.
- 24-48 hours later, misoprostol, 600-800 mcg vaginally followed by 200-400 mcg vaginally q 3 hours.
- The loading dose of misoprostol appears to reduce overall induction time.
- If patient desires immediate induction, give mifepristone and wait 3 hours for first dose of misoprostol.
- Prior cesarean delivery: there is no clear evidence of an increased risk of uterine rupture with labor induction abortion in women with one prior cesarean. A review suggested a rate of uterine rupture of .28% in scarred uteri vs. .04% in unscarred uteri. Please see protocol for labor induction for women with prior C/S (Induction of labor in 2nd and 3rd trimester with prior cesarean section).
- Pre-procedure feticide may facilitate the time to expulsion with labor induction abortion although data are conflicting on this point.

ADMINISTRATIVE PROCEDURES

1. An abortion is not considered a birth in the case of induction of labor. If there is no evidence of life, a fetal death certificate should not be completed, and an entry should not be made in the delivery log.
2. In cases where a woman desires to terminate a pregnancy beyond 22-23 weeks for fetal or maternal indications, please consult the Family Planning Service.
3. When an induced abortion results in a live-born infant—showing any signs of life such as a heartbeat or voluntary movement—a birth certificate should be completed, and in the space on the birth certificate describing the type of delivery, the word "induced" should be entered. A death certificate must be completed if/when the infant dies. On the woman's medical record, although a live birth resulted from the procedure, this is still recorded as an induced abortion. The diagnosis on the woman's chart should be "induced abortion" with secondary diagnosis giving the indication for the procedure. In addition, a diagnosis of "live-born infant" should be made as a secondary diagnosis. This reflects the unusual outcome of the live birth from an induced abortion. Do not make an entry in the delivery room log.

Title:
Owner:
Effective Date:
Doc. #

4. Parents have the right to burial of the fetus regardless of the gestational age and despite choosing induced abortion. Nursing has the names of mortuaries to arrange for burial.
5. Grief counseling and keepsakes should be offered to the parents

CONSULTATION

Twenty-four hour consultation is available by calling the Division of Family Planning service at the University of New Mexico Hospital through PALS.

REFERENCES

1. SFP guideline: http://www.societyfp.org/_documents/resources/guidelines2011-1.pdf.

The information in this SOP is designed to aid practitioners in making decisions about appropriate obstetric and gynecologic care. These SOP guidelines should not be construed as dictating an exclusive course of treatment or procedure. Variations in practice may be warranted based on the needs of the individual patient, resources, and limitations unique to the UNM setting or type of practice.

Title:
Owner:
Effective Date:
Doc. #

Prepared by: Division of Family Planning

Approved by: _____

Chair, Department of Obstetrics and Gynecology

Date _____

[illegible]

Title:
Owner:
Effective Date:
Doc. #

Exhibit 6.2

Applies To:
Department: Obstetrics and Gynecology
Revised:
Effective Date: _____

Title: Management of Very Early Pregnancy Medical and Surgical Abortion		Policy			
Patient Age Group:	(X) N/A	() All Ages	() Newborns	() Pediatric	() Adult

POLICY STATEMENT

This protocol is for the management of women desiring abortion at early gestational ages (i.e. prior to ultrasound identification of a clear gestational sac or gestational sac with yolk sac). Surgical abortion in this subgroup remains safe and relatively effective, with appropriate informed consent.

EARLY GESTATIONAL AGE

Women may present for termination of pregnancy at very early gestational ages. All women desiring surgical abortion should have ultrasound performed for dating and confirmation of intrauterine pregnancy. This protocol specifically applies to women -

- Without a gestational sac and/or
- Without a yolk sac

This procedure does **NOT** apply to women with clearly identified extra-uterine pregnancies who should be treated for ectopic pregnancy.

MANAGEMENT

Surgical and medical abortion is a reasonable and effective method of pregnancy termination in women without defined gestational sac or yolk sac. Providers should counsel patients of a 2-3% risk (for surgical abortion)¹ and 9-15% risk (for medical abortion)² of ongoing pregnancy, risk of undiagnosed ectopic pregnancy and the need for continued follow up. The woman has 2 options:

1. Follow up in 1-2wks to verify gestational sac with yolk sac to verify intrauterine pregnancy vs. earlier depending on serum quantitative beta hCG
2. Proceed with medical vs. surgical abortion with close follow up of serum quantitative beta hCG

If the woman elects SURGICAL ABORTION:

1. Counseling should be documented on date of options counseling.
2. Check quantitative serum quantitative beta hCG on date of presentation:
 - if the beta hCG level is **above** the discriminatory zone,
 - Refer to OB Triage for re-evaluation with DI ultrasound
 - Counsel with specific concern for ectopic pregnancy and consider MTX vs. D&C via MVA to rule out intrauterine pregnancy
 - Place in beta book

- If the beta hCG level **below** the discriminatory zone
 - o Proceed with surgical abortion –examine products of conception and document evaluation of tissue within the procedure note. If a gestational sac and chorionic villi are identified, no further follow up is needed.
 - o If a gestational sac and villi are NOT identified, patients should be counseled about signs and symptoms of ectopic or continuing pregnancy and a follow-up appointment should be scheduled. They should have follow up serum quantitative beta hCG in 48 hours with successful abortion defined as a >50% decrease in the hCG level.
- If the woman elects MEDICAL ABORTION:
 1. Counseling should be documented on date of options counseling.
 2. Check quantitative serum quantitative beta hCG on date of presentation;
 3. Schedule a serum quantitate beta hCG and clinic follow up in one week. A $\geq 80\%$ decrease in hCG levels is defined as a successful abortion.
 4. For more information about medication abortion, please see separate medication abortion SOP³.

REFERENCES

1. [REDACTED] (2015). Manual compared with electric vacuum aspiration for abortion at less than 6 weeks of gestation. *Obstetrics and Gynecology*, 125, 1121-1129.
2. [REDACTED] (2013). Mifepristone and buccal misoprostol in women with no defined intrauterine gestational sac. *Contraception*, 87, 855-858.
3. [REDACTED] (2015, 06 30). *Medical Abortion*. ([REDACTED], Ed.) Retrieved 8 10, 2015, from UNM Department of ObGyn Standard Operating Procedures:
[REDACTED]

The information in this SOP is designed to aid practitioners in making decisions about appropriate obstetric and gynecologic care. These SOP guidelines should not be construed as dictating an exclusive course of treatment or procedure. Variations in practice may be warranted based on the needs of the individual patient, resources, and limitations unique to the UNM setting or type of practice.

DOCUMENT APPROVAL & TRACKING

Prepared by: Division of Family Planning

Approved by: [REDACTED]

Approval: [REDACTED]

[REDACTED] Department of Obstetrics and Gynecology

10/14/15

Date

SOP # / Version #	Effective Date	Supersedes	Review Date	Summary of Change(s)

Exhibit 6.3

Applies To:
Department: Obstetrics and Gynecology
Revised:
Effective Date: _____

Title: Second Trimester Pregnancy Termination, D&E and induction of labor		Policy	
Patient Age Group:	(X) N/A	() All Ages	() Newborns () Pediatric () Adult

POLICY STATEMENT

This protocol is for management of pregnancy termination in the second trimester (13-25 weeks). Most women who undergo induced abortion or miscarriage management from 13-16 weeks choose dilatation and evacuation (D&E). Beyond 16-17 weeks, women should generally be given a choice between induction of labor vs. D&E although it appears that complications are more common with induction of labor than with D&E (1).

ADMISSION CONSIDERATIONS

- Prior to the procedure it is the physician's responsibility to:
 - provide the patient with a full explanation of both D&E and labor induction with risks and benefits of each.
 - obtain specific informed consent form for pregnancy termination and sign the informed consent document.
- All women will undergo ultrasound evaluation for gestational age assessment.
- At or beyond 24-25 weeks, pregnancy termination will be considered on a case-by-case basis for maternal or fetal reasons.
- Terminations for genetic/maternal health indications and for fetal demise are routinely scheduled on L&D. Such cases should be scheduled by calling the L&D front desk scheduler.
- The Family Planning Service will schedule and staff D&E procedures. A faculty from Family Planning is available 24-7 through the Reproductive Health PALS (272-2000) line. In the case of induction of labor, family planning or the primary physician with the L&D team will manage the patient.
- A memory box may be made for women who desire footprints, etc. whether the termination occurs by D&E or by induction of labor. Grief counseling is available for women.

DOCUMENTATION

The medical record should reflect the diagnosis and counseling for pregnancy termination. In addition, a dated and timed procedure note will describe procedures performed in the case of D&E, and, in the case of induction, the time of passage of the fetus and placenta, estimated blood loss, and any complications.

METHOD

- D&E
 - Most women choose D&E when it is offered, although some women choose induction of labor for personal reasons (e.g., in order to hold the baby) or for genetic studies. Studies

Title: _____
Owner: _____
Effective Date: _____
Doc. # _____

suggest that overall, D&E is safer, resulting in fewer D&Cs for retained placenta and less infectious morbidity.

- a. For D&E, contact the Family Planning attending on call via PALS who will arrange the procedure and placement of laminaria in preparation for the procedure.
- b. If upon presentation to L&D for admission, fetal heart beat is present and feticide is planned/desired, Family Planning or MFM should be consulted. Feticide may be accomplished with intracardiac KCl or with intra-fetal or intra-amniotic digoxin per a separate SOP (Fetal intracardiac KCL or intrafetal/intra-amniotic digoxin injection).

2. Labor induction termination

- Candidates for labor induction abortion in the 2nd trimester include genetic terminations or those for health of the woman who choose not to undergo D&E. The combination of mifepristone and misoprostol is the most effective and fastest. Use of mifepristone reduces the induction to abortion time by 40-50%.

3. Women with pregnancy from 12-24 weeks:

- Mifepristone tablet, 200 mg orally.
- 24-48 hours later, misoprostol, 600-800 mcg vaginally followed by 200-400 mcg vaginally q 3 hours.
- The loading dose of misoprostol appears to reduce overall induction time.
- If patient desires immediate induction, give mifepristone and wait 3 hours for first dose of misoprostol.
- Prior cesarean delivery: there is no clear evidence of an increased risk of uterine rupture with labor induction abortion in women with one prior cesarean. A review suggested a rate of uterine rupture of .28% in scarred uteri vs. .04% in unscarred uteri. Please see protocol for labor induction for women with prior C/S (Induction of labor in 2nd and 3rd trimester with prior cesarean section).
- Pre-procedure feticide may facilitate the time to expulsion with labor induction abortion although data are conflicting on this point.

ADMINISTRATIVE PROCEDURES

1. An abortion is not considered a birth in the case of induction of labor. If there is no evidence of life, a fetal death certificate should not be completed, and an entry should not be made in the delivery log.
2. In cases where a woman desires to terminate a pregnancy beyond 22-23 weeks for fetal or maternal indications, please consult the Family Planning Service.
3. When an induced abortion results in a live-born infant—showing any signs of life such as a heartbeat or voluntary movement—a birth certificate should be completed, and in the space on the birth certificate describing the type of delivery, the word "induced" should be entered. A death certificate must be completed if/when the infant dies. On the woman's medical record, although a live birth resulted from the procedure, this is still recorded as an induced abortion. The diagnosis on the woman's chart should be "induced abortion" with secondary diagnosis giving the indication for the procedure. In addition, a diagnosis of "live-born infant" should be made as a secondary diagnosis. This reflects the unusual outcome of the live birth from an induced abortion. Do not make an entry in the delivery room log.

Title:
Owner:
Effective Date:
Doc. #

4. Parents have the right to burial of the fetus regardless of the gestational age and despite choosing induced abortion. Nursing has the names of mortuaries to arrange for burial.
5. Grief counseling and keepsakes should be offered to the parents

CONSULTATION

Twenty-four hour consultation is available by calling the Division of Family Planning service at the University of New Mexico Hospital through PALS.

REFERENCES

1. SFP guideline: [REDACTED]

The information in this SOP is designed to aid practitioners in making decisions about appropriate obstetric and gynecologic care. These SOP guidelines should not be construed as dictating an exclusive course of treatment or procedure. Variations in practice may be warranted based on the needs of the individual patient, resources, and limitations unique to the UNM setting or type of practice.

Title:
Owner:
Effective Date:
Doc. #

DOCUMENT APPROVAL & TRACKING

Prepared by: _____ Division of Family Planning

Approved by: _____

Approval: _____

Department of Obstetrics and Gynecology

Date

SOP # / Version #	Effective Date	Supersedes	Review Date	Summary of Change(s)

Title:
Owner:
Effective Date:
Doc. #

Exhibit 6.4



Your
Comfort
is Our Focus

[Our Doctors](#) [Pregnancy Options & Counseling](#) [Abortion Care](#) [Miscarriage](#) [Birth Control](#) [Vasectomy](#) [Fees](#) [Contact](#)

Abortion Care

We offer abortion care up to 23 weeks gestational age (time since last menstrual period). The method of abortion depends on how far along the pregnancy is.

- If you are under 10 weeks (70 days after your last period), you could have a medical abortion or a surgical abortion (D&C).
- After 10 weeks, you must have a surgical abortion. You can also choose to have a surgical abortion instead of a medical abortion if you are less than 9 weeks.

Oral pain medications, intravenous sedation, and nitrous oxide gas are available for pain control.

"The office and medical staff were very informative and very kind. Also very understanding and non-judgmental."

Medical Abortion

A medical abortion is an option that is available to you if you are 10 weeks along or less. This is done by taking 2 medications. The first, a tablet of mifepristone (*the Abortion Pill*), is taken in our office. Then 6-72 hours later, at home, you take the next medication, misoprostol. The combination of these two medications causes the pregnancy to be passed from your body. It is important to come back to the office a week or two later so an ultrasound can be done to ensure that the medication worked and the pregnancy is gone.

Surgical Abortion

There are two different types of surgical or suction abortion. You can have a surgical abortion from very early in pregnancy (6 weeks from your last period) through 23 weeks. The procedure takes approximately 15 minutes to complete but the whole visit may take several hours depending on your individual situation. You will be given pain medication and you may need additional time after the procedure to recover. Since an ultrasound is done at the end of the procedure, a follow-up visit is not always necessary. We will do a phone follow-up with you a few days later to make sure you are feeling OK. After 12-16 weeks, we may need to get your cervix (the opening of the uterus) ready for the procedure by using medicine to soften the cervix. This can make the appointment longer or, sometimes when the pregnancy is more advanced, it may take another 1-2 days to prepare your cervix for the procedure.

Exhibit 6.5

The chart shows grants to UNM from the Susan Thompson Buffett Foundation. The following pages were extracted from the 990 forms where the grant information was obtained.

2001	\$223,291	UNM Health Sciences Center	Project Support	Page 33
2002	\$34,653	UNM Health Sciences Center	Project Support	76
2003	\$61,889	University of New Mexico	Project Support	115
2004				
2005	\$451,199	University of New Mexico	Project Support	205
2006				
2007	\$14,000	University of New Mexico	Project Support	310
2008	\$465,480	University of New Mexico School of Public Health	Project Support	353
2009	\$15,649 \$131,360	University of New Mexico	Project Support	395
2010	\$14,079	University of New Mexico	Project Support	444
2011	\$15,602 \$17,144 \$591 \$200,571	UNM Foundation	Project Support	504
2012	\$331,632	University of New Mexico	Project Support	583
2013	\$339,347 \$47,639 \$33,734	The Regents of UNM The Regents of UNM The University of NM	Project Support	622 622 633
2014	\$251,201 \$28,775 \$23,920 \$336,948	The Regents of UNM UNM Health Sciences Center UNM Health Sciences Center UNM Health Sciences Center	Project Support	691 692 692 692

The Buffett Foundation 47-6032365
990-PF Fiscal Year Ending June 30, 2002
Part XV, Line 3a

University of New Mexico Health Science Center Albuquerque, NM (Project support)	\$223,291.00
University of North Carolina, Chapel Hill Chapel Hill, NC (Fellowships)	\$78,196.64
University of Pennsylvania Philadelphia, PA (Project support)	\$58,100.00
University of Pittsburgh Physicians Pittsburgh, PA (Project support)	\$41,637.00
University of Pittsburgh Pittsburgh, PA (Fellowships)	\$28,741.00
University of Puerto Rico, Cayey Cayey, Puerto Rico (Project support)	\$98,500.00
University of Rochester Rochester, NY (Project support)	\$161,555.00
University of Rochester Rochester, NY (Fellowships)	\$949,258.14
USC Obstetricians & Gynecologists Los Angeles, CA (Fellowships)	\$228,873.00
University of Washington Seattle, WA (Fellowships)	\$53,945.00
Wayne State College Wayne, NE (Scholarships)	\$68,082.50
Willows Foundation Arlington, VA (Project support)	\$1,590,521.00
Zoofari 2001 Omaha, NE (General support)	\$55,000.00
██	\$10,000.00
████████████████████	\$10,000.00
██	\$10,000.00
████████████████████	\$10,000.00

The Buffett Foundation 47-6032365
 990-PF Fiscal Year Ending June 30, 2003
 Part XV, Line 3a

San Francisco Symphony San Francisco, CA (General support)	\$15,000.00
Self Reliance Foundation Arlington, VA (Project support)	\$200,000.00
Southeast Community College Lincoln, NE (Scholarships)	\$6,632 87
Student Insurance Pittsburgh, PA (Fellowships)	\$1,982 00
Teammates of Nebraska Omaha, NE (General support)	\$50,000 00
Tulane University New Orleans, LA (Fellowships)	\$23,996.00
University of Alabama, Birmingham Birmingham, AL (Fellowships)	\$15,140 25
University of Illinois Chicago, IL (Fellowships)	\$210,015 54
University of Massachusetts Amherst, MA (Fellowships)	\$12,717 00
University of Michigan Ann Arbor, MI (Contribution returned)	(\$5,197 63)
University of Nebraska College of Tech Agric Curtis, NE (Project support)	\$2,152.00
University of Nebraska, Kearney Kearney, NE (Scholarships)	\$47,289 25
University of Nebraska, Lincoln Lincoln, NE (Scholarships)	\$172,513 53
University of Nebraska Medical Center Omaha, NE (Scholarships)	\$20,700 00
University of Nebraska, Omaha Omaha, NE (Scholarships)	\$42,385.00
University of New Mexico Health Science Center Albuquerque, NM (Project support)	\$34,653.00
University of North Carolina, Chapel Hill Chapel Hill, NC (Fellowships)	\$53,751 80

University of Maryland Baltimore, MD (Program support)	Cash			\$40,000.00
Univ of Medicine and Dentistry of NJ Somerset, NJ (Program support) January 15, 2004	4 sh Berkshire Hathaway Class A	\$66.80		\$343,580.00
Univ of Medicine and Dentistry of NJ Somerset, NJ (Program support) January 15, 2004	2 sh Berkshire Hathaway Class B	\$1.11		\$5,737.00
Univ of Medicine and Dentistry of NJ Newark, NJ (Program support)	Cash			\$98,250.00
University of Nebraska Kearney, NE (Scholarships)	Cash			\$48,670.30
University of Nebraska Lincoln, NE (Scholarships)	Cash			\$230,087.96
Univ of Nebraska College of Tech Ag Curtis, NE (Scholarships)	Cash			\$2,256.90
University of Nebraska Omaha, NE (Scholarships)	Cash			\$38,876.56
University of Nebraska Medical Center Omaha, NE (Scholarships)	Cash			\$15,000.00
University of New Mexico Albuquerque, NM (Project support)	Cash			\$61,889.00
University of Pennsylvania Philadelphia, PA (Program support)	Cash			\$243,580.00
University of Pittsburgh Pittsburgh, PA (Fellowship)	Cash			\$27,344.00
University of Puerto Rico San Juan, PR (Project support)	Cash			\$99,000.00
University of Rochester Rochester, NY (Fellowship)	Cash			\$52,606.00

UNIVERSITY OF MEDICINE AND DENTISTRY OF NEW JERSEY , NEWARK, NJ	PUBLIC CHARITY	PROJECT SUPPORT	478,268.
UNIVERSITY OF MINNESOTA , MINNEAPOLIS, MN	PUBLIC CHARITY	PROJECT SUPPORT	293,617.
UNIVERSITY OF MONTREAL , MONTREAL, CANADA	PUBLIC CHARITY	FELLOWSHIP	84,000.
UNIVERSITY OF NEBRASKA MEDICAL CENTER , OMAHA, NE	PUBLIC CHARITY	SCHOLARSHIP	25,000.
UNIVERSITY OF NEBRASKA - KEARNEY , KEARNEY, NE	PUBLIC CHARITY	SCHOLARSHIP	63,063.
UNIVERSITY OF NEBRASKA - LINCOLN , LINCOLN, NE	PUBLIC CHARITY	SCHOLARSHIP	208,385.
UNIVERSITY OF NEBRASKA - OMAHA , OMAHA, NE	PUBLIC CHARITY	SCHOLARSHIP	74,736.
UNIVERSITY OF NEW MEXICO , ALBUQUERQUE, NM	PUBLIC CHARITY	PROJECT SUPPORT	451,199.
UNIVERSITY OF PITTSBURGH , PITTSBURGH, PA	PUBLIC CHARITY	FELLOWSHIP	57,516.
UNIVERSITY OF PUERTO RICO , SAN JUAN, PR	PUBLIC CHARITY	PROJECT SUPPORT	80,000.
UNIVERSITY OF ROCHESTER , ROCHESTER, NY	PUBLIC CHARITY	FELLOWSHIP	49,708.

THE SUSAN THOMPSON BUFFETT FOUNDATION, EIN 47-6032365
FORM 990-PF, PART XV
GRANTS AND CONTRIBUTIONS PAID IN 2007

FY 2007

Payee Name	Street	City	State or Country	Zip Code	Status	Purpose	Grant No.	Grants and Contributions Paid In 2007
University of Miami	PO Box 016960 (D-50)	Miami	FL	33101	Public Charity	Project Support	477.01	323,532
University of Miami	PO Box 016960 (D-50)	Miami	FL	33101	Public Charity	Project Support	696.00	44,928
University of Montreal	3175 Chemin Cote Ste-Catherine	Montreal	Quebec	H3T 1C5	Public Charity	Project Support	433.00	42,000
University of Montreal	3175 Chemin Cote Ste-Catherine	Montreal	Quebec	H3T 1C5	Public Charity	Project Support	434.00	46,820
University of Nebraska Kearney	Memorial Student Affairs Building	Kearney	NE	68849	Public Charity	Scholarships	394.01	196,727
University of Nebraska Lincoln	PO Box 880411	Lincoln	NE	68588-0411	Public Charity	Scholarships	395.01	738,384
University of Nebraska Medical Center	600 S 42 Street	Omaha	NE	68188-4265	Public Charity	Scholarships	408.01	24,750
University of Nebraska Omaha	Epplay Administration Building, Room 103	Omaha	NE	68182-0292	Public Charity	Scholarships	409.01	269,070
University of New Mexico	MSC10 5580, 1 University of New Mexico	Albuquerque	NM	87131-0001	Public Charity	Project Support	315.00	14,000
University of North Carolina	School of Public Health, CB #7445, Rosenau Hall	Chapel Hill	NC	27599	Public Charity	Project Support	448.00	491,460
University of North Carolina	School of Public Health, CB #7445, Rosenau Hall	Chapel Hill	NC	27599	Public Charity	Project Support	717.00	390,390
University of Northern Iowa	213 East Bartlett Hall	Cedar Falls	IA	50614-0394	Public Charity	Project Support	585.00	238,992
University of Northern Iowa	213 East Bartlett Hall	Cedar Falls	IA	50614-0394	Public Charity	Project Support	614.00	114,672
University of Pennsylvania	39th and Market Streets	Philadelphia	PA	19104	Public Charity	Project Support	296.01	383,441
University of Pittsburgh	300 Halket Street	Pittsburgh	PA	15213	Public Charity	Project Support	551.00	6,446
University of Pittsburgh	300 Halket Street	Pittsburgh	PA	15213	Public Charity	Project Support	545.00	42,828
University of Pittsburgh	300 Halket Street	Pittsburgh	PA	15213	Public Charity	Project Support	578.00	97,614
University of Puerto Rico	GPO Box 365067	San Juan	Puerto Rico	00936-5067	Public Charity	Project Support	385.02	140,000
University of Washington	325 Ninth Ave	Seattle	WA	98104	Public Charity	Project Support	238.00	274,770
University of Washington	325 Ninth Ave	Seattle	WA	98104	Public Charity	Project Support	521.00	36,284
USC Obstetricians and Gynecologists	1640 Marengo Street	Los Angeles	CA	90033	Public Charity	Project Support	405.01	81,111
USC Obstetricians and Gynecologists	1641 Marengo Street	Los Angeles	CA	90033	Public Charity	Project Support	405.02	505,960
USC Obstetricians and Gynecologists	1640 Marengo Street	Los Angeles	CA	90033	Public Charity	Project Support	594.00	69,843
USC Obstetricians and Gynecologists	1640 Marengo Street	Los Angeles	CA	90033	Public Charity	Project Support	660.00	48,888
USC Obstetricians and Gynecologists	1640 Marengo Street	Los Angeles	CA	90033	Public Charity	Project Support	696.00	36,950
Venture Strategies	2140 Shattuck Ave	Berkeley	CA	94704	Public Charity	Project Support	596.00	3,767,575
Venture Strategies	2140 Shattuck Ave	Berkeley	CA	94704	Public Charity	Project Support	708.00	189,145
Washington University School of Medicine	660 South Euclid Avenue	St Louis	MO	63110	Public Charity	Project Support	491.01	301,840
Washington University St Louis	49111 Barnes-Jewish Hospital	St Louis	MO	63110-1094	Public Charity	Project Support	500.00	168,354
Washington University St Louis	49111 Barnes-Jewish Hospital	St Louis	MO	63110-1094	Public Charity	Project Support	596.00	2,307,784
Washington University St Louis	49111 Barnes-Jewish Hospital	St Louis	MO	63110-1094	Public Charity	Project Support	639.00	17,580
Washington University St Louis	49111 Barnes-Jewish Hospital	St Louis	MO	63110-1094	Public Charity	Project Support	682.00	32,888
Wayne State College	1111 Main Street	Wayne	NE	68787	Public Charity	Scholarships	412.01	162,286
Western Nebraska Community College	1601 E 27th Street	Scottsbluff	NE	69361	Public Charity	Scholarships	414.02	1,139
Willows Foundation	6867 Elm Street	McLean	VA	22101	Expenditure Responsibility	Project Support	278.03	2,010,274
Willows Foundation	6867 Elm Street	McLean	VA	22101	Expenditure Responsibility	Project Support	549.00	279,909
Womens Health Services	2635 Lincoln Way	Clinton	IA	52732	Public Charity	Project Support	625.00	509,530
Womens Link Worldwide	P O Box 415	Northfield	VT	05663	Public Charity	Project Support	430.01	250,000
Womens Link Worldwide	P O Box 415	Northfield	VT	05663	Public Charity	Project Support	435.01	140,000
World Health Organization	20 Ave Appia, CH 12-11	Geneva	Switzerland		Public Charity	Project Support	458.00	500,000
World Health Organization	20 Ave Appia, CH 12-11	Geneva	Switzerland		Public Charity	Project Support	662.00	376,918
Yale University	333 Cedar Street	New Haven	CT	06520-8063	Public Charity	Project Support	418.01	292,096
								202,684,478

**THE SUSAN THOMPSON BUFFETT FOUNDATION
GRANTS PAID IN 2008**

<u>Organization</u>	<u>Street</u>	<u>City</u>	<u>State</u>	<u>Zipcode</u>	<u>Request ID</u>	<u>Recipient Status</u>	<u>Purpose</u>	<u>Grants Paid in 2008</u>
University of British Columbia	4500 Oak Street	Vancouver	BC	V6H 3N1	765 00	Public Charity	Project Support	185,030
University of California - Los Angeles	Box 951740, 27-139 CHS	Los Angeles	CA	90095	527 00	Public Charity	Project Support	46,800
University of California at San Francisco	3333 California Street	San Francisco	CA	94118	209.02	Public Charity	Project Support	392,160
University of California at San Francisco	3333 California Street	San Francisco	CA	94118	211.04	Public Charity	Project Support	203,320
University of California Los Angeles	10533 Le Conte Ave	Los Angeles	CA	90095	837.00	Public Charity	Project Support	35,100
University of California San Francisco	3333 California Street	San Francisco	CA	94118	359.00	Public Charity	Project Support	160,901
University of California San Francisco	Box 0744	San Francisco	CA	94143	402.03	Public Charity	Project Support	678,600
University of California San Francisco	Box 0744	San Francisco	CA	84143	424 03	Public Charity	Project Support	2,520,481
University of California San Francisco	3333 California Street	San Francisco	CA	94118	571 00	Public Charity	Project Support	198,723
University of California San Francisco	3333 California Street	San Francisco	CA	94118	621 00	Public Charity	Project Support	1,374,648
University of California San Francisco	3333 California Street	San Francisco	CA	94118	691 00	Public Charity	Project Support	1,242,750
University of California San Francisco	Box 0744	San Francisco	CA	94143	793 00	Public Charity	Project Support	62,038
University of California San Francisco	Box 0744	San Francisco	CA	94143	828 00	Public Charity	Project Support	35,966
University of California, San Francisco	3333 California Street	San Francisco	CA	94118	807 00	Public Charity	Project Support	61,103
University of Chicago	5841 S Maryland Ave	Chicago	IL	60637	381.02	Public Charity	Project Support	6,501
University of Chicago	5841 S Maryland Ave	Chicago	IL	60637	381 03	Public Charity	Project Support	545,850
University of Chicago	5841 South Maryland Avenue	Chicago	IL	60637	411 03	Public Charity	Project Support	229,257
University of Chicago	5841 South Maryland Avenue	Chicago	IL	60637	675 00	Public Charity	Project Support	35,332
University of Chicago	5841 S. Maryland Avenue	Chicago	IL	60637-1470	753 00	Public Charity	Project Support	70,212
University of Chicago	5841 S Maryland Ave	Chicago	IL	60637	774 00	Public Charity	Project Support	10,366
University of Chicago	5841 S Maryland Ave	Chicago	IL	60637	808 00	Public Charity	Project Support	29,597
University of Colorado Health Science Center	PO Box 6511	Aurora	CO	80045	829 00	Public Charity	Project Support	156,450
University of Illinois-Chicago	1919 W. Taylor St	Chicago	IL	60612	473 00	Public Charity	Project Support	68,070
University of Medicine and Dentistry of New Jersey	186 South Orange Ave	Newark	NJ	07103	555 00	Public Charity	Project Support	156,024
University of Medicine and Dentistry of New Jersey	186 South Orange Ave	Newark	NJ	07103	558 00	Public Charity	Project Support	39,480
University of Michigan	1500 East Medical Center Drive	Ann Arbor	MI	48109	415 01	Public Charity	Project Support	208,823
University of Michigan	1501 East Medical Center Drive	Ann Arbor	MI	48109	415 02	Public Charity	Project Support	234,840
University of Michigan	1500 East Medical Center Drive	Ann Arbor	MI	48109	740 00	Public Charity	Project Support	64,515
University of Michigan	1500 East Medical Center Drive	Ann Arbor	MI	48109	797 00	Public Charity	Project Support	388,668
University of Nebraska	16 Canfield Admin Bldg	Lincoln	NE	68588	735 00	Public Charity	Project Support	953,514
University of Nebraska Lincoln	16 Canfield Admin Bldg	Lincoln	NE	68588	395 02	Public Charity	Project Support	609,226
University of Nebraska Lincoln	16 Canfield Admin Bldg	Lincoln	NE	68588	395 03	Public Charity	Project Support	988,627
University of Nebraska Medical Center	600 S 42 St	Omaha	NE	68198	408 02	Public Charity	Project Support	10,800
University of Nebraska Medical Center	600 S 42 St	Omaha	NE	68198	408 03	Public Charity	Project Support	35,414
University of Nebraska-Kearney	Memorial Student Affairs Bldg	Kearney	NE	68849	394 02	Public Charity	Project Support	127,618
University of Nebraska-Kearney	Memorial Student Affairs Bldg	Kearney	NE	68849	394.03	Public Charity	Project Support	266,719
University of Nebraska-Omaha	Eppley Admin Bldg	Omaha	NE	68182	409 02	Public Charity	Project Support	219,520
University of Nebraska-Omaha	Eppley Admin Bldg	Omaha	NE	68182	409 03	Public Charity	Project Support	413,259
University of New Mexico	1 University of New Mexico School of Public Health, CB #7445, Rosenau Hall	Albuquerque	NM	87108	315 01	Public Charity	Project Support	465,480
University of North Carolina	725 MLK Jr Blvd	Chapel Hill	NC	27599	446 01	Public Charity	Project Support	469,944
University of North Carolina	213 E Bartlett Hall	Chapel Hill	NC	27599	838.00	Public Charity	Project Support	3,425
University of Northern Iowa	213 E Bartlett Hall	Cedar Falls	IA	50614	725 00	Public Charity	Project Support	2,501,230
University of Northern Iowa	213 E Bartlett Hall	Cedar Falls	IA	50614	731.00	Public Charity	Project Support	37,116
University of Pittsburgh	301 Halket Street	Pittsburgh	PA	15213	734 00	Public Charity	Project Support	66,934
University of Pittsburgh	301 Halket Street	Pittsburgh	PA	15213	739 00	Public Charity	Project Support	43,870

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

FY 2009

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
University of Nebraska Board of Reg 16 Canfield Administration Bldg Lincoln, NE 68588	NONE	509 (a)(1)	Project Support	1,545,715
University of Nebraska Board of Reg Eppley Administration Bldg Omaha, NE 68182	NONE	509 (a)(1)	Project Support	490,695
University of Nebraska Board of Reg Eppley Administration Bldg Omaha, NE 68182	NONE	509 (a)(1)	Project Support	942,222
University of New Mexico1 University of New Mexico Albuquerque, NM 871310001	NONE	509 (a)(1)	Project Support	15,649
University of New Mexico1 University of New Mexico Albuquerque, NM 871310001	NONE	509 (a)(1)	Project Support	131,360
University of North Carolina at Cha School of Public HealthCB 7445 Rosenau Hall Chapel Hill, NC 27599	NONE	509 (a)(1)	Project Support	465,152
University of North Carolina at Cha 4015 Old Clinic Bldg Chapel Hill, NC 27599	NONE	509 (a)(1)	Project Support	204,688
University of Northern Iowa213 E Bartlett Hall Cedar Falls, IA 50614	NONE	509 (a)(1)	Project Support	2,688,265
University of Puerto RicoGPO Box 365067 San Juan, PR 009365067	NONE	509 (a)(1)	Project Support	100,000
University of Rochester601 Elmwood Ave Rochester, NY 14642	NONE	509 (a)(1)	Project Support	33,488
University of Southern California1640 Marengo Street Los Angeles, CA 90033	NONE	509 (a)(2)	Project Support	518,560
University of Southern California1640 Marengo Street Los Angeles, CA 90033	NONE	509 (a)(2)	Project Support	52,260
University of Southern California1640 Marengo Street Los Angeles, CA 90033	NONE	509 (a)(2)	Project Support	67,429
University of Washington325 Ninth Ave Seattle, WA 98104	NONE	509 (a)(1)	Project Support	239,680
USC Obstetricians and Gynecologists 1640 Marengo Street Los Angeles, CA 90033	NONE	509 (a)(2)	Project Support	25,460
Total			3a	407,931,970

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

FY 2010

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
REGENTS OF THE UNIVERSITY OF COLORA 12631 EAST 17TH AVE AURORA, CO 80045	NONE	509 (A)(1)	PROJECT SUPPORT	29,575
REGENTS OF THE UNIVERSITY OF MICHIG 3003 SOUTH STATE ST ANN AROBR, MI 48109	NONE	509 (A)(1)	PROJECT SUPPORT	378,978
REGENTS OF THE UNIVERSITY OF MICHIG 1500 EAST MEDICAL CENTER DRIVE ANN ARBOR, MI 48109	NONE	509 (A)(1)	PROJECT SUPPORT	29,998
REGENTS OF THE UNIVERSITY OF NEW ME UNIVERSITY OF NEW MEXICO ALBUQUERQUE, NM 87131	NONE	509 (A)(1)	PROJECT SUPPORT	14,079
REGENTS UNIVERSITY OF CALIFORNIA LO 2233 POST STREET SAN FRANCISCO, CA 94115	NONE	509 (A)(1)	PROJECT SUPPORT	300,967
REGENTS UNIVERSITY OF CALIFORNIA LO 11000 KINROSS BLDG LOS ANGELES, CA 90095	NONE	509 (A)(1)	PROJECT SUPPORT	3,390
REGENTS UNIVERSITY OF CALIFORNIA LO 11000 KINROSS BLDG LOS ANGELES, CA 90095	NONE	509 (A)(1)	PROJECT SUPPORT	234,413
REGETNTS OF THE UNIVERSITY OF MICHIG 1500 EAST MEDICAL CENTER DRIVE ANN ARBOR, MI 48106	NONE	509 (A)(1)	PROJECT SUPPORT	42,178
RELIGIOUS COALTION FOR REPRODUCTIVE 1413 K STREET NW WASHINGTON, DC 20005	NONE	509 (A)(1)	PROJECT SUPPORT	501,732
SALEM BAPTIST CHURCH 3131 LAKE STREET OMAHA, NE 68111	NONE	509 (A)(1)	PROJECT SUPPORT	5,000
SOCIETY OF FAMILY PLANNING 255 SOUTH 17TH STREET PHILADELPHIA, PA 19103	NONE	509 (A)(1)	PROJECT SUPPORT	1,464,614
SONOMA COUNTY ACADEMIC FOUNDATION F 3324 CHANATE RD SANTA ROSA, CA 95404	NONE	509 (A)(1)	PROJECT SUPPORT	57,595
SONOMA COUNTY ACADEMIC FOUNDATION F 3324 CHANATE RD SANTA ROSA, CA 95404	NONE	509 (A)(1)	PROJECT SUPPORT	71,308
SOUTHEAST COMMUNITY COLLEGE 8800 O STREET LINCOLN, NE 68520	NONE	509 (A)(1)	PROJECT SUPPORT	97,768
SOUTHEAST COMMUNITY COLLEGE 8800 O STREET LINCOLN, NE 68520	NONE	509 (A)(1)	PROJECT SUPPORT	63,739
Total			3a	247,394,595

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA3451 WALNUT STREET PHILADELPHIA,PA 19104	NONE	509 (A)(1)	PROJECT SUPPORT	323,520
TUFTS MEDICAL CENTER PARENT INC800 WASHINGTON STREET BOSTON,MA 02111	NONE	509 (A)(1)	PROJECT SUPPORT	348,401
UNITED NATIONS FOUNDATION 1800 MASSACHUSETTS AVE WASHINGTON,DC 20036	NONE	509 (A)(1)	PROJECT SUPPORT	100,000
UNITY HEALTHCARE1609 CEDAR ST MUSCATINE,IA 52761	NONE	509 (A)(1)	PROJECT SUPPORT	50,677
UNIVERSITY HOSPITALS HEALTH SYSTEMS INC11100 EUCLID AVE CLEVELAND,OH 44106	NONE	509 (A)(1)	PROJECT SUPPORT	317,859
UNIVERSITY OF CHICAGO5841 S MARYLAND AVE CHICAGO,IL 60637	NONE	509 (A)(1)	PROJECT SUPPORT	361,892
UNIVERSITY OF CHICAGO5841 S MARYLAND AVE CHICAGO,IL 60637	NONE	509 (A)(1)	PROJECT SUPPORT	69,910
UNIVERSITY OF IOWA200 HAWKINS DRIVE IOWA CITY,IA 52242	NONE	509 (A)(1)	PROJECT SUPPORT	123,178
UNIVERSITY OF LOUISVILLE FOUNDATION2323 S BROOK STREET LOUISVILLE,KY 40292	NONE	509 (A)(1)	PROJECT SUPPORT	355,595
UNIVERSITY OF MARYLAND BALTIMORE FOUNDATION620 W LEXINGTON STREET BALTIMORE,MD 21201	NONE	509 (A)(1)	PROJECT SUPPORT	178,550
UNIVERSITY OF MARYLAND BALTIMORE FOUNDATION620 W LEXINGTON ST 4TH FLOOR BALTIMORE,MD 21201	NONE	509 (A)(1)	PROJECT SUPPORT	220,286
UNIVERSITY OF NEBRASKA FOUNDATION1010 LINCOLN MALL LINCOLN,NE 68508	NONE	509 (A)(1)	SCHOLARSHIPS	2,275,906
UNIVERSITY OF NEBRASKA MEDICAL CENTER984245 NEBRASKA MEDICAL CENTER OMAHA,NE 68198	NONE	509 (A)(1)	SCHOLARSHIPS	95,888
UNIVERSITY OF NEBRASKA MEDICAL CENTER984245 NEBRASKA MEDICAL CENTER OMAHA,NE 68198	NONE	509 (A)(1)	SCHOLARSHIPS	139,400
UNIVERSITY OF NEBRASKA MEDICAL CENTER984245 NEBRASKA MEDICAL CENTER OMAHA,NE 68198	NONE	509 (A)(1)	SCHOLARSHIPS	11,278
UNIVERSITY OF NEW MEXICO1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE,NM 87131	NONE	509 (A)(1)	PROJECT SUPPORT	15,602
UNIVERSITY OF NEW MEXICO1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE,NM 87131	NONE	509 (A)(1)	PROJECT SUPPORT	17,144
UNIVERSITY OF NEW MEXICO1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE,NM 87131	NONE	509 (A)(1)	PROJECT SUPPORT	591
UNIVERSITY OF NEW MEXICO FOUNDATION2211 LOMAS NE ALBUQUERQUE,NM 87106	NONE	509 (A)(1)	PROJECT SUPPORT	200,571
UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL104 AIRPORT DRIVE CHAPEL HILL,NC 27599	NONE	509 (A)(1)	PROJECT SUPPORT	247,013
UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL104 AIRPORT DRIVE CHAPEL HILL,NC 27599	NONE	509 (A)(1)	PROJECT SUPPORT	70,000
UNIVERSITY OF NORTHERN IOWA 213 E BARTLETT HALL CEDAR FALLS,IA 50614	NONE	509 (A)(1)	PROJECT SUPPORT	1,920,261
UNIVERSITY OF SOUTHERN CALIFORNIA2020 ZONAL AVENUE LOS ANGELES,CA 90033	NONE	509 (A)(2)	PROJECT SUPPORT	371,966
UNIVERSITY OF SOUTHERN CALIFORNIA1200 N STATE ST LOS ANGELES,CA 900330129	NONE	509 (A)(2)	PROJECT SUPPORT	48,240
UNIVERSITY OF SOUTHERN CALIFORNIA1200 NORTH STATE STREET LOS ANGELES,CA 90033	NONE	509 (A)(2)	PROJECT SUPPORT	28,140
UNIVERSITY OF UTAH75 SOUTH 2000 EAST SALT LAKE CITY,UT 99501	NONE	509 (A)(1)	PROJECT SUPPORT	305,670
VALLEY-WIDE HEALTH SYSTEMS INC128 MARKET STREET ALAMOSA,CO 81101	NONE	509 (A)(1)	PROJECT SUPPORT	272,721
VENTURE STRATEGIES INNOVATIONS2140 SHATTUCK AVE BERKLEY,CA 94704	NONE	PRIVATE OPERATING FO	PROJECT SUPPORT	7,120,310
VISITING NURSE SERVICES OF IOWA1111 9TH STREET DES MOINES,IA 50314	NONE	509 (A)(1)	PROJECT SUPPORT	292,851
WASHINGTON HOSPITAL CENTER 106 IRVING ST WASHINGTON,DC 20010	NONE	509 (A)(1)	PROJECT SUPPORT	4,000

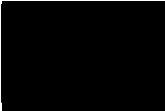
FY 2011

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

FY 2012

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
TRUSTEES OF COLUMBIA UNIVERSITY 622 W 168TH STREET NEW YORK, NY 10032	NONE	509 (A)(1)	PROJECT SUPPORT	417,080
TRUSTEES OF COLUMBIA UNIVERSITY 630 EAST 168TH STREET NEW YORK, NY 10032	NONE	509 (A)(1)	PROJECT SUPPORT	250,505
TRUSTEES OF THE UNIVERSITY OF ILLINOIS 820 S WOOD ST CHICAGO, IL 60612	NONE	509 (A)(1)	PROJECT SUPPORT	50,000
TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA 3400 SPRUCE ST PHILADELPHIA, PA 19104	NONE	509 (A)(1)	PROJECT SUPPORT	366,851
UNITY HEALTHCARE 1609 CEDAR STREET MUSCATINE, IA 52761	NONE	509 (A)(1)	PROJECT SUPPORT	25,464
UNIVERSITY CLINICAL EDUCATION AND RESEARCH ASSOCIATES 1319 PUNAHOU STREET HONOLULU, HI 96826	NONE	509 (A)(2)	PROJECT SUPPORT	212,806
UNIVERSITY OF CHICAGO 5841 S MARYLAND AVE CHICAGO, IL 60637	NONE	509 (A)(1)	PROJECT SUPPORT	337,008
UNIVERSITY OF COLORADO 12631 EAST 17TH AVE AURORA, CO 80045	NONE	509 (A)(1)	PROJECT SUPPORT	50,000
UNIVERSITY OF COLORADO 12631 EAST 17TH AVE AURORA, CO 80045	NONE	509 (A)(1)	PROJECT SUPPORT	37,735
UNIVERSITY OF MARYLAND BALTIMORE FOUNDATION 620 W LEXINGTON STREET BALTIMORE, MD 21201	NONE	509 (A)(1)	PROJECT SUPPORT	167,117
UNIVERSITY OF MASSACHUSETTS 119 BELMONT ST WORCESTER, MA 016052982	NONE	509 (A)(1)	PROJECT SUPPORT	50,000
UNIVERSITY OF NEBRASKA FOUNDATION 3835 HOLDREGE STREET LINCOLN, NE 68583	NONE	509 (A)(1)	SCHOLARSHIPS	2,540,464
UNIVERSITY OF NEW MEXICO MSC 09 5220 1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE, NM 87131	NONE	509 (A)(1)	PROJECT SUPPORT	331,632
UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL 104 AIRPORT DRIVE CHAPEL HILL, NC 27599	NONE	509 (A)(1)	PROJECT SUPPORT	240,810
UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL 104 AIRPORT DRIVE CHAPEL HILL, NC 27599	NONE	509 (A)(1)	PROJECT SUPPORT	223,201

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment



FY 2013

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA 3400 SPRUCE STREET PHILADELPHIA,PA 19104	NONE	PC	PROJECT SUPPORT	50,000
TUFTS MEDICAL CENTER PARENT INC 800 WASHINGTON STREET BOSTON,MA 02111	NONE	PC	PROJECT SUPPORT	244,279
TUFTS MEDICAL CENTER PARENT INC 800 WASHINGTON STREET BOSTON,MA 02111	NONE	PC	PROJECT SUPPORT	50,000
UNIVERSITY CLINICAL EDUCATION AND RESEARCH ASSOCIATES 1319 PUNAHOU ST HONOLULU,HI 96826	NONE	PC	PROJECT SUPPORT	330,625
UNIVERSITY OBGYN ASSOCIATES 736 IRVING AVE SYRACUSE,NY 13210	NONE	PC	PROJECT SUPPORT	50,000
UNIVERSITY OF CALIFORNIA DAVIS 4860 Y STREET SACRAMENTO,CA 95817	NONE	PC	PROJECT SUPPORT	49,854
UNIVERSITY OF CALIFORNIA IRVINE 101 THE CITY DRIVE SOUTH ORANGE,CA 92868	NONE	PC	PROJECT SUPPORT	47,079
UNIVERSITY OF LOUISVILLE FOUNDATION 2323 S BROOK STREET LOUISVILLE,KY 40292	NONE	PC	PROJECT SUPPORT	260,610
UNIVERSITY OF MARYLAND BALTIMORE FOUNDATION 620 W LEXINGTON STREET BALTIMORE,MD 21201	NONE	PC	PROJECT SUPPORT	25,136
UNIVERSITY OF NEBRASKA MEDICAL CENTER 600 S 42 STREET OMAHA,NE 68198	NONE	PC	SCHOLARSHIPS	154,962
UNIVERSITY OF NEBRASKA MEDICAL CENTER 600 S 42 STREET OMAHA,NE 68198	NONE	PC	SCHOLARSHIPS	174,250
UNIVERSITY OF NEVADA SCHOOL OF MEDICINE 2040 W CHARLESTON BLVD LAS VEGAS,NV 89102	NONE	PC	PROJECT SUPPORT	125,582
UNIVERSITY OF NEW MEXICO 1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE,NM 87131	NONE	PC	PROJECT SUPPORT	33,734
UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL 104 AIRPORT DRIVE CHAPEL HILL,NC 27599	NONE	PC	PROJECT SUPPORT	125,181
UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL 104 AIRPORT DRIVE CHAPEL HILL,NC 27599	NONE	PC	PROJECT SUPPORT	234,558
Total			3a	450,319,788

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

FY 2013

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
THE NATIONAL CAMPAIGN TO PREVENT TEEN AND UNPLANNED PREGNANCY 1776 MASSACHUSETTS AVE NW WASHINGTON,DC 20036	NONE	PC	PROJECT SUPPORT	201,750
THE NATIONAL CAMPAIGN TO PREVENT TEEN AND UNPLANNED PREGNANCY 1776 MASSACHUSETTS AVE NW WASHINGTON,DC 20036	NONE	PC	PROJECT SUPPORT	852,825
THE ONE CAMPAIGN 1400 EYE STREET NW WASHINGTON,DC 20005	NONE	PC	PROJECT SUPPORT	1,002,369
THE REGENTS OF THE UNIVERSITY OF COLORADO 12631 E 17 AVE AURORA,CO 80045	NONE	PC	PROJECT SUPPORT	295,538
THE REGENTS OF THE UNIVERSITY OF NEBRASKA 134 VARNER HALL LINCOLN,NE 68583	NONE	PC	SCHOLARSHIPS	3,146,720
THE REGENTS OF THE UNIVERSITY OF NEW MEXICO 1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE,NM 87131	NONE	PC	PROJECT SUPPORT	339,347
THE REGENTS OF THE UNIVERSITY OF NEW MEXICO 1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE,NM 87131	NONE	PC	PROJECT SUPPORT	47,639
THE TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA 3400 SPRUCE STREET PHILADELPHIA,PA 19104	NONE	PC	PROJECT SUPPORT	338,849
THE UNIVERSITY OF CHICAGO 5841 S MARYLAND AVE CHICAGO,IL 60637	NONE	PC	PROJECT SUPPORT	343,527
TRUSTEES OF COLUMBIA UNIVERSITY 622 W 168TH STREET NEWYORK,NY 10032	NONE	PC	PROJECT SUPPORT	430,014
TRUSTEES OF COLUMBIA UNIVERSITY 622 W 168TH STREET NEWYORK,NY 10032	NONE	PC	PROJECT SUPPORT	337,218
TRUSTEES OF COLUMBIA UNIVERSITY 622 W 168TH STREET NEWYORK,NY 10032	NONE	PC	PROJECT SUPPORT	82,232
TRUSTEES OF DARTMOUTH COLLEGE 11 ROPE FERRY ROAD HANOVER,NH 037551404	NONE	PC	PROJECT SUPPORT	349,411
TRUSTEES OF INDIANA UNIVERSITY 980 INDIANA AVENUE INDIANAPOLIS,IN 46202	NONE	PC	PROJECT SUPPORT	399,127
TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA 3400 SPRUCE STREET PHILADELPHIA,PA 19104	NONE	PC	PROJECT SUPPORT	100,000
Total			3a	450,319,788

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

FY 2014

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
THE REGENTS OF THE UNIVERSITY OF NEBRASKA OMAHA EPPLEY ADMIN BLDG OMAHA, NE 68182		GOV	SCHOLARSHIPS	4,385,722
THE REGENTS OF THE UNIVERSITY OF NEW MEXICO 1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE, NM 87131		GOV	PROJECT SUPPORT	251,201
THE TRUSTEES OF THE UNIVERSITY OF CALIFORNIA SAN FRANCISCO 3333 CALIFORNIA ST SAN FRANCISCO, CA 94143		GOV	PROJECT SUPPORT	100,182
THE UNIVERSITY OF CHICAGO 5841 S MARYLAND AVE CHICAGO, IL 60637		PC	PROJECT SUPPORT	440,188
THE UNIVERSITY OF PENNSYLVANIA 3451 WALNUT STREET PHILADELPHIA, PA 19104		GOV	PROJECT SUPPORT	341,666
THE UNIVERSITY OF UTAH 75 SOUTH 2000 EAST SALT LAKE CITY, UT 84112		GOV	PROJECT SUPPORT	299,150
THOMAS JEFFERSON UNIVERSITY 834 CHESTNUT STREET PHILADELPHIA, PA 19107		PC	PROJECT SUPPORT	48,312
TIDES CENTER 1014 TORNEY AVENUE SAN FRANCISCO, CA 94129		PC	PROJECT SUPPORT	299,014
██████████ ██████████ ██████████ ██████████ ██████████	N/A	I	ALICE BUFFETT OUTSTANDING TEACHER AWARD	10,000
TRUSTEES OF COLUMBIA UNIVERSITY 622 W 168TH STREET NEW YORK, NY 10032		PC	PROJECT SUPPORT	417,988
TRUSTEES OF COLUMBIA UNIVERSITY 630 EAST 168TH STREET NEW YORK, NY 10032		PC	PROJECT SUPPORT	250,000
TRUSTEES OF COLUMBIA UNIVERSITY 630 WEST 168TH ST NEW YORK, NY 10032		PC	PROJECT SUPPORT	1,314,567
TRUSTEES OF DARTMOUTH COLLEGE 11 ROPE FERRY ROAD HANOVER, NH 037551404		PC	PROJECT SUPPORT	311,957
TUFTS UNIVERSITY 800 WASHINGTON STREET BOSTON, MA 02111		PC	PROJECT SUPPORT	50,000
UMASS MEMORIAL HEALTH CARE 306 BELMONT ST WORCESTER, MA 01604		PC	PROJECT SUPPORT	50,000
Total			3a	416,440,853

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment FY 2014

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
UMASS MEMORIAL HEALTH CARE 306 BELMONT ST WORCESTER,MA 01604		PC	PROJECT SUPPORT	352,399
UNIVERSITY ASSOCIATES IN OBSTETRICS AND GYNECOLOGY 101 NICOLLS ROAD STONY BROOK,NY 11794		PC	PROJECT SUPPORT	350,062
UNIVERSITY CLINICAL EDUCATION AND RESEARCH ASSOCIATES 1319 PUNAHOU STREET HONOLULU,HI 96826		PC	PROJECT SUPPORT	420,867
UNIVERSITY HOSPITALS HEALTH SYSTEMS INC 11100 EUCLID AVENUE CLEVELAND,OH 44106		PC	PROJECT SUPPORT	249,664
UNIVERSITY OF CALIFORNIA DAVIS PO BOX 989062 WEST SACRAMENTO,CA 95798		GOV	PROJECT SUPPORT	49,854
UNIVERSITY OF ILLINOIS AT CHICAGO 820 S WOOD STREET MC 808 CHICAGO,IL 60612		GOV	PROJECT SUPPORT	48,423
UNIVERSITY OF LOUISVILLE FOUNDATION 2323 S BROOK STREET LOUISVILLE,KY 40292		PC	PROJECT SUPPORT	127,876
UNIVERSITY OF MARYLAND BALTIMORE FOUNDATION INC 620 W LEXINGTON STREET BALTIMORE,MD 21201		PC	PROJECT SUPPORT	52,674
UNIVERSITY OF NEVADA RENO FOUNDATION MAIL STOP 007 RENO,NV 895570007		PC	PROJECT SUPPORT	347,917
UNIVERSITY OF NEW MEXICO HEALTH SCIENCES CENTER 1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE,NM 87131		GOV	PROJECT SUPPORT	28,775
UNIVERSITY OF NEW MEXICO HEALTH SCIENCES CENTER 1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE,NM 87131		GOV	PROJECT SUPPORT	23,920
UNIVERSITY OF NEW MEXICO HEALTH SCIENCES CENTER 1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE,NM 87131		GOV	PROJECT SUPPORT	336,948
UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL 104 AIRPORT DRIVE CHAPEL HILL,NC 27599		GOV	PROJECT SUPPORT	236,439
UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL 104 AIRPORT DRIVE CHAPEL HILL,NC 27599		GOV	PROJECT SUPPORT	289,556
UNIVERSITY OF OKLAHOMA FOUNDATION 731 ELM STREET NORMAN,OK 73019		PC	PROJECT SUPPORT	4,500
Total			3a	416,440,853

Exhibit 6.6



*Division of Family Planning
Department of Obstetrics and Gynecology*

Date: June 2, 2014

To: [REDACTED] Southwestern Women's Options
Address: [REDACTED]

RE: Required Resident/Fellow Assignments

Dear [REDACTED]

This letter serves as an Agreement between University of New Mexico School of Medicine Fellowship in Family Planning and Southwestern Women's Options involved in fellowship education for required assignments and is effective from July 1, 2014 and will remain in effect for two years or until updated, changed or terminated by the Fellowship in Family Planning and Southwestern Women's Options.

The following person(s) are responsible for education and supervision: [REDACTED] Dr. [REDACTED] [REDACTED] The above mentioned people are responsible for the education and supervision of the fellows while rotating at Southwestern Women's Options.

The faculty at Southwestern Women's Options must provide appropriate supervision of fellows' activities and maintain a learning environment conducive to educating the residents/fellows in abortion care and the 6 ACGME competencies. The faculty must evaluate resident performance in a timely manner during each rotation or similar educational assignment and document this evaluation at completion of the assignment.

The major goal of the rotation is to give additional volume of 2nd trimester abortions under your expert supervision. In cooperation with the UNM Fellowship in Family Planning Program Director, the Site Director and the faculty at Southwestern Women's Options are responsible for the day-to-day activities of the Fellows to ensure that the outlined goals and objectives are met during the course of the educational experiences at Southwestern Women's Options.

The duration(s) of the assignment(s) to the participating site is (2) two-week rotations. During assignments to Participating Site, fellows will be under the general direction of the SWO clinic.

Sincerely,

[Redacted Signature]

[Redacted]

Date

[Redacted]
University of New Mexico, Department of Ob/Gyn

[Redacted]

July 24th '14
Date

Southwestern Women's Options

Exhibit 6.7



PROGRAM LETTER OF AGREEMENT BETWEEN
University of New Mexico Family Medicine Residency
and
Southwest Women's Options Clinic

This letter serves as an Agreement between University of New Mexico School of Medicine Family Medicine Residency Program (UNM) and Southwest Women's Options Clinic for Family Medicine resident education in obstetrics. The Agreement is effective from July 1st, 2011 and will remain in effect till June 30th 2012 or until updated, changed or terminated by the Residency Program and Participating Site.

The Faculty at Southwest Women's Options Clinic is responsible for education and supervision of the UNM Family Medicine residents while rotating at the Southwest Women's Options Clinic. The faculty must provide appropriate supervision of residents in patient care activities and maintain a learning environment conducive to educating the residents in the ACGME competency areas. The faculty must evaluate resident performance in a timely manner during each rotation or similar educational assignment and document this evaluation at completion of the assignment.

The content of the educational experiences has been developed according to ACGME Residency Program Requirements, and includes the following goals and objectives:

- Residents should demonstrate competence in
 - surgical management of incomplete abortion
 - management of abortion complications
 - pregnancy options counseling
 - contraception counseling
- Residents will gain experience in
 - first trimester dating ultrasound
 - cervical dilation and curettage and related gynecological skills
 - uterine aspiration for miscarriage
 - uterine aspiration for pregnancy termination (if desired)
 - medication abortion (if desired)

In cooperation with the Program Director, the Southwest Women's Options Clinic Site Director and faculty are responsible for the day-to-day activities of the Residents to ensure that the outlined goals and objectives are met during the course of the educational experiences at Southwest Women's Options Clinic.

The duration of the assignment to the participating site will be July 1st, 2011 – June 30th, 2012. During assignments to Women's Options Clinic the resident will be under the general direction of the University of New Mexico Graduate Medical Education Committee's and Program's Policy and Procedure Manual and Participating Site's policies for Reproductive Health.

[Redacted Signature]

University of New Mexico Family Medicine Residency Program

[Redacted Signature]

[Redacted Signature]

Southwest Women's Options Clinic

1-5-12
Date

1-7-12
Date

Exhibit 6.8

Regents' Policy Manual - Section 7.8:

Signature Authority for Contracts



Adopted Date: 09-12-1996

Amended: 03-10-1997

Amended: 12-06-2007

Amended: 08-12-2008

Amended: 12-14-2010

Amended: 04-08-2014

Amended: 03-14-2016

Applicability

This policy applies to all members of the Board of Regents, faculty, staff and students.

Policy

The Board of Regents must approve and an officer of the Board of Regents must sign the following types of contracts and documents, after due authorization by the Regents:

1. Contracts between the President and the University;
2. Contracts between the Chancellor for Health Sciences and the University;
3. Bond resolution, notification and certification documents, including certification of bond sale; and
4. Any contracts or other documents required by law to be signed by an officer of the Board of Regents.

The Chief Procurement Officer or designee must sign contracts for the purchase of goods and services, and the authority to do so is hereby delegated.

The President shall have the authority to sign all other contracts and documents (other than contracts or agreements for the purchase of goods and services) for the operation of the University and may delegate this authority. The President's signature authority as set forth above includes the authority to execute certificates representing stocks, bonds, or other securities in

order to buy, sell, assign, or endorse for transfer such securities. The President shall also have authority to require additional signatures on contracts for the purchase of goods and services.

It is the official policy of the University to avoid financial settlements of claims and lawsuits against the University except when appropriate. The University shall not agree to pay a financial settlement without (a) an appropriate risk assessment of the case, (b) written approval by the Chancellor for Health Sciences, Provost, or Executive Vice President for Administration, and (c) final approval by the President. A financial settlement payment by the University of \$400,000 or more must also be approved by the Board of Regents.

After fully advising the President, the Chancellor for Health Sciences is authorized to enter into affiliation agreements with other patient care facilities to provide educational opportunities.

The signature authority delegated in this policy must be exercised in accordance with other Regents' policies, some of which may require approval of the contract or other document by the Board of Regents.

References

RPM 1.4 ("Appointment of the President of the University"); RPM 7.10 ("Borrowing and Bonding Authority"); RPM 3.4 ("Health Sciences Center and Services"); and UAP 2010 ("Contract Signature Authority and Review").

Exhibit 6.9

Administrative Policies and Procedures Manual - Policy 2010: Contracts Signature Authority and Review

Date Originally Issued: 05-01-1997

Revised: 08-01-1997, 05-08-1998, 01-29-1999, 12-08-1999, 07-12-2000, 08-02-2004, 08-01-2006, 11-15-2007, 01-01-2008, 08-12-2008, 07-01-2011, 11-01-2011, 08-29-2014

Authorized by Regents' Policy 7.8 "Signature Authority for Contracts"

Process Owner: Executive Vice President for Administration/CFO/COO

1. General

This policy designates who, within the University, is authorized to sign contracts on behalf of the University. All previous delegations or communications on this subject are superseded. Contracts may be signed on behalf of the University only by:

- A person in a position specifically authorized by the University Board of Regents.
- The Chancellor for Health Sciences, an executive vice president, Provost, or vice president to whom the President has delegated the authority delegated to the President by the Board of Regents, as specified herein.
- The Chief Procurement Officer and Vice President for Human Resources, as specified herein.
- A person who has received a sub-delegation in accordance with this policy.

2. Contract

For the purposes of this policy, a "contract" is defined as a written agreement between two (2) parties intended to have legal effect, including Memorandums of Understanding, Memorandums of Agreement, Nondisclosure Agreements, and Letters of Understanding, in one of the following forms listed below.

- Documents signed by UNM and another party.
- Offers signed by UNM.
- Certain pre-approved UNM forms signed by others.
- Contract forms promulgated by others signed by UNM.

The term "contract" does not include written agreements between different departments or other similar units of the University. While such interdepartmental agreements are not legally binding on the departments or units that participate in the agreement, they may serve the useful purpose of memorializing agreed upon arrangements between departments. Interdepartmental written agreements should be in form of a memorandum signed by one or more cognizant vice

presidents or executive vice presidents, as appropriate. University Purchase Orders, although contracts, are also discussed in UAP 4320 ("Purchasing Goods Off Campus") and UAP 4325 ("Purchasing Professional Services From Independent Contractors").

3. Signature Authority and Delegation

The University has a centralized system of signature authority. The Regents have delegated general signature authority to the President, who has delegated portions of that authority to the Chancellor for Health Sciences, Provost, executive vice presidents, vice presidents, Chief Procurement Officer, and Vice President for Human Resources under this Policy. Although under limited circumstances these positions may further delegate that authority by using the Delegation of Signature Authority Form (Exhibit A.), such delegations require approval by the President and should be used only when necessary and not defeat the centralized intent of this Policy. After obtaining the President's approval the individual requesting the delegation should forward a copy to the Policy Office and to the individual being delegated signature authority. Exhibit B1 (Main Campus and Branches) and Exhibit B2 (Health Sciences Center) list all such delegations made prior to the date shown on the exhibit and will be updated regularly.

All delegations shall be to a position within the University and not to the individual holding the position at the time of the delegation. When there is turnover in a position, the new individual has the authority of the previous incumbent. Persons in an acting or interim position also have the general signature authority of that position.

All contracts must be reviewed by a contract review officer for legal form, prior to signature. If a contract is a form contract using language that has been approved by University Counsel's Office then a person with signature authority may, at his or her discretion, sign it without review by a contract review officer.

4. General Delegation of Signature Authority

Throughout this section, certain signature authority delegations are made for "main campus and the branches." For the purposes of this Policy, "main campus and the branches" refers to all components of The University of New Mexico outside of the Health Sciences Center, including, for example off-campus centers, graduate centers, the athletic campus, rented buildings, and other off-campus sites.

4.1. Operations

The Executive Vice President for Administration has authority to sign all contracts, except those reserved to the President, Chancellor for Health Sciences, or to the Regents and those used for the purchase of goods and/or services (refer to Section 4.2. herein).

The Chancellor for Health Sciences has authority to sign all contracts for the Health Sciences Center and the UNM Health System, except those reserved to the President or to the Regents, contracts for the purchase of goods and/or services (refer to Section 4.2. herein), settlement

agreements (except in accordance with [Section 4.7.](#) herein), intellectual property assignments (refer to [Section 4.8.](#) herein), real estate contracts (refer to [Section 4.9.](#) herein), and contracts for purchase of construction and certain professional services (refer to [Section 4.10.](#) herein).

Signature of employment contracts for officials reporting to the President is reserved to the President and may not be delegated.

These delegations overlap with many of the more specific delegations listed below.

4.2. Contracts for Certain Goods and/or Services

The Chief Procurement Officer or delegee has exclusive authority to sign contracts for the purchase of goods and/or services, other than construction contracts and certain professional services contracts, as set forth in [Section 4.10.](#) herein. The purchase of goods and/or services for clinical components of the Health Sciences Center may be performed by The University of New Mexico Hospital Purchasing Department, as a separate satellite purchasing office of the University, in compliance with University procurement policies and procedures.

4.3. Research and Other Sponsored Projects

4.3.1. Main Campus and the Branches

4.3.1.1. Contracts and Grants Documents

The Executive Vice President for Administration has authority to sign contracts and grant documents requiring approval for sponsored projects for main campus and the branches.

4.3.1.2. Proposals

The Vice President for Research has authority to sign proposals for sponsored projects.

4.3.1.3. Research Contracts Not Covered by Other Sections

The Vice President for Research has authority to sign research contracts not involving the receipt or expenditure of funds or otherwise incurring direct financial obligations and not covered by other sections.

4.3.2. Health Sciences Center

The Chancellor for Health Sciences has authority to sign contracts, grant documents, proposals, and other agreements for research or sponsored projects for the Health Sciences Center and the UNM Health System.

4.4. Employment Contracts

4.4.1. Faculty Employment

The Provost/ Executive Vice President for Academic Affairs has authority to sign faculty employment offers and contracts for main campus and the branch campuses. The Chancellor for Health Sciences has authority to sign faculty employment offers and contracts for the HSC and the UNM Health System.

4.4.2. Staff Employment

4.4.2.1. Annual Employment Contracts

The executive vice president or vice president responsible for the position being employed and the Chancellor for Health Sciences and the President have authority to sign employment contracts and offers for contract employees under UAP 3240 ("Contract Employees").

4.4.2.2. Offers of Employment

All offer letters must be produced and completed by the Division of Human Resources for signature by the hiring official. Any changes or variations to the offer letter must be approved in advance by the Vice President for Human Resources.

4.4.3. Student Employment

The Provost/Executive Vice President for Academic Affairs has authority to sign contracts for student employment, including work study for main campus. The Chancellor for Health Sciences has authority to sign contracts for student employment, including work study for the HSC and the UNM Health System.

4.5. Contracts Affecting Students

4.5.1. Financial Aid and Loans to Students

The Provost/Executive Vice President for Academic Affairs has authority to sign applications and proposals to outside funding entities, short term emergency promissory notes to students, and other agreements relating to financial aid programs administered by Student Financial Aid. The Executive Vice President for Administration has authority to sign contracts with outside funding entities and other loans to students.

4.5.2. Student Housing

The Executive Vice President for Administration has authority to sign contracts relating to student housing.

4.5.3. Other Contracts Relating to Students and Not Covered by Other Sections

The Provost/Executive Vice President for Academic Affairs has authority to sign other contracts relating to students not involving the receipt of funds. Executive Vice President for

Administration has authority to sign other contracts relating to students involving the receipt of funds.

4.6. Academic Matters

The Provost/ Executive Vice President for Academic Affairs has authority to sign contracts concerning academic matters not involving the receipt or expenditure of funds for main campus. The Chancellor for Health Sciences has authority to sign contracts concerning academic matters not involving the receipt or expenditure of funds for the HSC and the UNM Health System.

4.7. Settlement Agreements

When the contract is a settlement agreement, release of rights, or similar agreement resolving legal claims against the University, it must be co-signed by an attorney in the University Counsel's Office, as well as signed by the University President and Chancellor for Health Sciences, Provost/ Executive Vice President for Academic Affairs, Executive Vice President for Administration/CFO/COO, or vice president who has responsibility for the matter.

It is the official policy of the University to avoid financial settlements of claims and lawsuits against the University except when appropriate. The University shall not agree to pay a financial settlement without (a) an appropriate risk assessment of the case, (b) written approval by the Chancellor for Health Sciences, Provost, or Executive Vice President for Administration/CFO/COO, and (c) final approval by the University President. A financial settlement payment by the University of \$400,000 or more must also be approved by the Board of Regents.

4.8. Intellectual Property Assignments

The Executive Vice President for Administration has authority to sign agreements assigning intellectual property rights by or to the University, except contracts for purchases by the University which must be signed by the Chief Procurement Officer (refer to Section 4.2. herein).

4.9. Real Estate

4.9.1. Main Campus and the Branches - Real Estate

4.9.1.1. Short-Term Leases of UNM Real Property and Leases of Others' Real Property of a Period of Six (6) Months or Less

The Chief Procurement Officer is authorized to sign all short-term real estate leases.

4.9.1.2. Long-Term Leases of UNM Real Property and Leases of Others' Real Property of a Period Exceeding Six (6) Months

The Executive Vice President for Administration and the Chief Procurement Officer are authorized to sign all long-term real estate contracts. Both signatures are required.

4.9.1.3. Other Real Estate Contracts

The Executive Vice President for Administration is authorized to sign all other real estate contracts.

4.9.2. Health Sciences Center

The Chief Procurement Officer and the Executive Vice President for Administration have authority to sign real estate contracts for the Health Sciences Center to the extent provided in Section 4.9.1. above, with the proviso that all such contracts must bear the written approval of the Chancellor for Health Sciences.

4.10. Construction Contracts with External Contractors and Contracts for Purchase of Professional Services Related to Architectural Services, External Auditing Services, Debt Financing, and Investment Management

The Executive Vice President for Administration and the Chief Procurement Officer are authorized to sign all construction contracts with external contractors and contracts for purchase of professional services related to architectural services, external auditing services, debt financing, and investment management. Both signatures are required.

4.11. Athletics

The Vice President for Athletics is authorized to sign all game contracts and contracts for rental of Athletic facilities.

5. Contract Review

Each contract must be carefully reviewed by the University employee initiating the contract and a University contract review officer. The University administrator with signature authority may designate additional review requirements for particular types of contracts, such as University Counsel for legal issues or Controller's review for budget. If the contract is reviewed by University Counsel or an Associate/Assistant University Counsel, it still requires review by a contract review officer.

Pre-approved Form Contracts (refer to Section 6. herein) have been thoroughly reviewed for legal form by the Office of University Counsel, and therefore do not require review by a contract review officer, unless additional language has been added, any blanks are not filled in, or exhibits/addendums are attached. (Sections 5.2.and 5.3. herein do not apply).

5.1. University Employee Initiating the Contract

The person initiating the contract for the University is responsible for reading the contract entirely and determining that:

- the contract language accurately reflects the current state of negotiations;
- the contract meets programmatic and University mission requirements;
- the contract represents a good deal for the University;
- the contract defines measurable deliverables;
- he or she can ensure compliance with the obligations it places on the University;
- safety and risk management concerns have been reasonably addressed; and
- the contract is sufficiently clear and consistent.

After being satisfied with the form and content of the contract, the initiating employee must complete the appropriate sections of the Contract Review Form (Exhibit C.) To the extent the initiating employee does not understand the proposed contract, or is uncomfortable with any of its provisions, he or she should note that information on the Contract Review Form or attach an explanatory memo. He or she shall submit the contract along with any other necessary documents, such as a copy of the purchase requisition where required, to the appropriate contract review officer for processing. Contract review officers for each area of specialty within the University are listed on the Contract Review Form. The initiating department should submit a purchase requisition, if required, into the system for approval; however a purchase order will not be processed until the signed contract and the Contract Review form is received by the Purchasing Department.

5.1.1. Contract Amendments

Any material changes to contracts will be processed in the same manner as the original contract and must indicate which contract they pertain to.

5.2. Contract Review Officer

Each administrator granted signature authority by this policy shall designate one or more contract review officers for contracts under their purview. All contract review officers shall be UNM employees. The University Counsel's Office will train contract review officers and will set training requirements necessary to maintain contract review officer status. The contract review officer will review for the concerns described in Section 5.1. herein with particular attention to safety and risk issues. The contract review officer shall also perform the following review functions for each contract, prior to submission to a person with signature authority.

5.2.1. Legal Form

The contract review officer shall review contracts to ensure all the requirements listed in Section 5.1. have been met and review the contract to the extent appropriate for:

- consistency with law (obtaining University Counsel review, if necessary);
- consistency with UNM rules and regulations;
- reasonable internal consistency and clarity; and

- consistency with any predecessor documents.

5.2.2. Other Institutional Reviews

The contract review officer shall determine what other institutional reviews are necessary prior to submission of the contract for signature, indicate these reviews on the form, and coordinate obtaining the appropriate reviews. In particular, contract review officers are responsible for making sure that departments which will be obligated or otherwise affected by the performance of a contract have an adequate opportunity to review the contract. The routing for particular types of contracts will generally be established by the person with signature authority. The contract review officer will coordinate the reviews and then forward the contract to the person with signature authority.

5.3. Contract Review Form

Contracts submitted for signature must be accompanied by a Contract Review Form (Exhibit C.). Individuals reviewing the proposed contract prior to its signature (execution) shall sign the Contract Review Form indicating that they have reviewed it, and what they reviewed it for. The Contract Review Form will normally have at least two (2) signatures consisting that of the initiating employee (originator), and that of a contract review officer.

5.4. Signature (Execution) of Contract on Behalf of University

The contract review officer will forward the contract to the University administrator who has been delegated signature authority for that contract. The administrator who signs the contract shall appoint a UNM employee responsible for monitoring contract performance in accordance with UAP 2015 ("Contract Monitoring"). The administrator who signed the contract or his or her designee will send a copy of the contract and a contract coversheet to the University Purchasing Department via email to contract@unm.edu or to a departmental CMS administrator approved by the Purchasing Department. The Purchasing Department or the CMS administrator will add the contract to the Contract Management System, which serves as a repository for all contracts that obligate the University and provides information for contract tracking and monitoring.

6. Form Contracts

6.1. Pre-approved Form Contract Review

Form contracts that have been pre-approved by University Counsel's Office do not require review by a contract review officer prior to execution, provided that any blanks are filled in as per any instructions on the form, provided the language has not been altered, and there are no exhibits or addendums. The University Secretary shall assign a number to each such pre-approved form contract and shall maintain a record of them.

6.2. Contracts for the Purchase of Goods and Services

The President and the Chief Procurement Officer may adopt policies and procedures authorizing the execution of pre-approved Purchase Order forms to be used in limited circumstances defined in the policies and procedures in Section 4000 of the University Administrative Policies and Procedures Manual by individuals defined in those policies and procedures. Any such policies and procedures now in existence are hereby confirmed as part of this policy.

7. Compliance

No University employee may sign (execute) any contract purporting to be on behalf of the University, unless delegated signature authority to do so, pursuant to this policy. Any employee who violates this section may be subject to disciplinary action. No contract signed by a person without signature authority delegated by the Board of Regents or pursuant to this policy shall be binding on the University.

8. Records Retention

Each administrator who signs a contract shall keep the signed contract on file or designate where the signed contract should be kept. The contract will be kept on file for at least the period of the contract plus three (3) years or the period of time required by law, whichever is longer. If signed contracts are sent to a different location, a log should be kept describing the contract and indicating where it was sent. The University Secretary's Office should be advised of the location.

9. Attachments

Exhibit A. - Delegation of Signature Authority Form (To complete this form using MS Word click [here](#)).

[Exhibit B1.](#) - Delegation of Signature Authority for Main Campus and Branches

 - Delegation of Signature Authority for Health Sciences Center

Exhibit C. - Contract Review Form (To complete this form using MS Word [click here](#)).

Exhibit 6.10

**DELEGATIONS OF SIGNATURE AUTHORITY FOR THE
HEALTH SCIENCES CENTER AND UNM HOSPITAL
EXHIBIT B2 TO POLICY 2010**

Effective Date: 6/15/2012
Revised: 3/4/2015, 6/5/2015, 8/4/2015, 3/14/2016

As stated in University Business Policy 2010, § 3, "All delegations shall be to a position within the University and not to the individual holding the position at the time of the delegation. When there is turnover in a position, the new individual has the authority of the previous incumbent. Persons in an acting or interim position also have the general signature authority of that position."

Del. No.	Type of Contract	Position with Authority	Limitations
010BF	Research and other sponsored projects	Vice President for HSC/UNM Finance and University Controller	None
012BF	Research and other sponsored projects	Vice President for HSC/UNM Finance and University Controller	None
177BF	Assignments of University-owned intellectual property created by Health Sciences Center employees to STC and assignments of University-owned intellectual property created by Health Sciences Center employees to the inventors	Chancellor for Health Sciences; Vice Chancellor for Research, Health Sciences Center	None
014HSC	Letters of offer for University Hospital staff	Executive Director of University Hospital Human Resources	None
041HSC	Releases of claims in settlement of the pediatric oncology claims and lawsuits	Senior Assoc University Counsel	None
043HSC	Settlements of University of New Mexico Hospital lien cases	CEO of University of New Mexico Hospital	Agreements must be signed for approval by an attorney in the University Counsel's Office
048HSC	Collective bargaining agreements with unions representing University of New Mexico Hospital employees (local 2166 and Local 1199)	CEO of University of New Mexico Hospital	None

Del. No.	Type of Contract	Position with Authority	Limitations
061HSC	Only hospitals and their associated outpatient clinics operated by the Health Sciences Center that do not involve exchange of funds	Assoc VP for Clinical Operations	None
084HSC	HSC pre-award research contracts relating primarily to confidentiality, material transfer, data use, or HIPAA-related issues	Senior Assoc Dean for Research (SOM)	Approval by CON or COP Dean, as appropriate; legal approval required for MTAs and data use agreements
102HSC	Employment contracts for senior UNM Hospital's administrative staff who report directly to the CEO, UNM Hospital	CEO, UNM Hospital	None
104HSC	HSC clinical facilities reassignment agreements w/ part-time employee, contract, and volunteer providers of professional services to UNMHSC patients for billing and collection of professional fees	CEO, UNM Hospital	None
105HSC	HSC house officer educational/training contracts and house officer special compensation agreements	Executive Dean, SOM Assoc Dean, Graduate Medical Education, SOM CEO, UNM Hospitals (incoming house officer rotations only)	None
107HSC	Fundraising contracts not involving expenditure of funds	HSC Chief Administrative Officer (for HSC, not involving clinical facilities) CEO, UNM Hospitals (for clinical facilities only)	None
108HSC	HSC clinical facilities reassignment agreements with part-time employee, contract, and volunteer providers of professional services to UNMHSC patients, for billing and collection of professional	Assoc VP for Clinical Operations	None

Del. No.	Type of Contract	Position with Authority	Limitations
	fees		
110HSC	Contracts for emergency loans to HSC students (including those signed only by student or only by UNM)	Executive Dean, SOM only Senior Assoc Dean for Education (SOM only) Dean, College of Pharmacy only Dean, College of Nursing only	None
111HSC	HSC house officer educational/training contracts and house officer special compensation agreements	Executive Dean, School of Medicine; Assoc Dean, Graduate Medical Education, School of Medicine; Assoc VP for Clinical Operations (incoming house officer rotations only)	Approval by Assoc Dean for Graduate Medical Education required for non-UNM house officers rotating in to UNM clinical facilities
112HSC	Fundraising contracts not involving expenditure of funds	HSC Chief Administrative Officer (for HSC) not involving clinical facilities; Assoc VP for Clinical Operations (for clinical facilities only)	None
113HSC	HSC expert witness agreements w/ government agencies	Executive Dean, SOM Senior Assoc Dean, Academic Affairs, SOM Dean, College of Pharmacy (for COP only) Dean, College of Nursing (for CON only)	None
114HSC	HSC house officer employment contracts (includes residents, interns, fellows)	Executive Dean, SOM Assoc Dean, Graduate Medical Education, SOM	None
115HSC	HSC clinical & non-clinical services, consulting (including research), training and collaboration agreements involving individual providers or departments, not involving expenditure of funds	Executive Dean, School of Medicine (School of Medicine only); Asst Dean, Administration, School of Medicine (School of Medicine only); Senior Assoc Dean for Research (SOM research only); Dean, College of Pharmacy (College of Pharmacy only); Dean, College of Nursing (College of Nursing only); Director, CRTC (CRTC only); Assoc VP for Clinical	Approval by Director, Clinical Contract Services, required; approval of appropriate department chair required for SOM contracts

Del. No.	Type of Contract	Position with Authority	Limitations
		Operations (clinical facilities only); Assoc VP for Financial Services (HSC administration only)	
116HSC	Licenses for short-term use of HSC space by outside parties for special programs	HSC Chief Administrative Officer (for space other than in clinical facilities); Assoc VP for Clinical Operations (for space in clinical facilities only)	Approval by Director, HSC Facilities Planning required
117HSC	Employment contracts for senior University Hospitals administrative staff who report directly to the Assoc VP for Clinical Operations	Assoc VP for Clinical Operations	None
120HSC	HSC clinical trial agreements, research agreements, and contracts funded with sponsored awards, excluding clinical contracts	HSC Assoc VP for Financial Services, Assoc Controller	None
121HSC	HSC proposals for sponsored research	Contract and Grant Administrators Sr. Contract and Grant Administrators Manager/Supervisor, PreAward	None
122HSC	HSC pre-award research contracts relating primarily to confidentiality, material transfer, data use, and HIPAA-related issues; and IRB authorization agreements	Sr Assoc Dean for Research, SOM (for all HSC) Executive Dean, SOM	Approval by CON or COP Dean, as appropriate Legal review required for MTAs, data use agreements, and IRB authorization agreements Authorized position may not sign contracts for which there may be a conflict of interest
124HSC	HSC clinical trial agreements, research agreements, and contracts funded w/ sponsored awards, excluding clinical contracts	Supervisor of Fiscal Services	None Period of Authority will be from 03-27-06 through 04-03-06

Del. No.	Type of Contract	Position with Authority	Limitations
133HSC	HSC clinical managed care contracts, clinical global and master contracts involving multiple departments	Executive Physician-in-Chief, UNM Health System; UNM Health System Chief Operating Officer (Clinical Facilities Only)	Use of HSC for purposes of this delegation does not include UNM Sandoval Regional Medical Center, Inc. or UNM Medical Group, Inc.
134HSC	Contracts for debt financing and investment management related to financial assets of UNM Hospitals	Chief Financial Officer, UNM Hospitals CEO, UNM Hospitals	None
136HSC	Lovelace GME Affiliation Agreement regarding resident aggregate caps	HSC Chief Administrative Officer	None
146HSC	HSC clinical & non-clinical services, consulting (including research), training and collaboration agreements involving individual providers or departments, excluding purchase agreements	Assistant Dean for finance & Administration, School of Medicine; Administrator, School of Medicine; Senior Associate Dean for Research (SOM research only); CEO, UNM Hospitals (UNM Hospital facilities only); Associate VP for Financial Services	Approval by Director, Clinical Contract Services, required for clinical services; Approval of appropriate department chair required for SOM contracts
147HSC	HSC locum tenens and specialty extension services contracts for which there is no expenditure of funds	Director of Finance, School of Medicine; Chief Financial Services Officer for the UNMHSC	None
148HSC	HSC confidentiality, non-disclosure, license, and similar intellectual property agreements required by hardware and software vendors	Assoc VP for Knowledge management & IT (for HSC, not involving clinical facilities); CEO, UNM Hospital (for clinical facilities only); UNMH Chief Information Officer (for clinical facilities only)	May not involve the receipt or expenditure of funds or otherwise incur direct financial obligations
157HSC	HSC clinical trial agreements, research agreements, and contracts funded with sponsored awards, excluding contracts	Vice President for HSC/UNM Finance and University Controller; Chief Budget and Finance Officer; Director, Financial Systems & Restricted Accounting	None
165HSC	HSC subaward agreements	Vice President for HSC/UNM Finance and University Controller; Chief Budget and Finance Officer, HSC; Director, Financial Systems and Restricted Accounting	None

Del. No.	Type of Contract	Position with Authority	Limitations
167HSC	HSC proposals for sponsored projects	Contract and Grant Administrators; Sr. Contract and Grant Administrators; Contract & Grant Supervisor; Manager/Supervisor, PreAward; Associate Director, Financial Services/HSC PreAward	None
168HSC	HSC clinical and non-clinical services, consulting (including research), training and collaboration agreements involving individual providers or departments, excluding purchase agreements	HSC Associate Vice President for Administration; Director of Finance, School of Medicine; Administrator, School of Medicine; Senior Associate Dean for Research (SOM research only); CEO, UNM Hospitals (UNM Hospital facilities only); Vice President for HSC/UNM Finance and University Controller; Chief Budget and Finance Officer	Approval by Director, Clinical Contract Services, required for clinical services; Approval of appropriate department chair required for SOM contracts.
170HSC	HSC student employment contracts and training affiliation agreements	Executive Dean, School of Medicine; Director of Finance, School of Medicine; Administrator, School of Medicine; Dean, College of Pharmacy; Dean, College of Nursing; Director, Health Sciences Library and Informatics Center; Associate Vice President for Administration (HSC administration only); Senior Associate Dean for Education, School of Medicine; CEO, UNM Hospitals (incoming students only)	None
173HSC	Agreements licensing third parties to use, for research purposes only, intellectual property of UNMHSC, but only for such intellectual property as has been assigned back to UNMHSC and/or UNMHSC inventors by STC.	Vice President for Research, Health Sciences Center	None
175HSC	Licenses for short-term use	Chief Administrative Officer,	None

Del. No.	Type of Contract	Position with Authority	Limitations
	of HSC space by outside parties for special programs	HSC (for space other than in clinical facilities); Health System Chief Operations Officer (for space in clinical facilities only)	
176HSC	HSC pre-award research contracts relating primarily to confidentiality, material transfer, data use, and HIPAA-related issues; and IRB authorization agreements	Vice Chancellor for Research, Health Sciences Center; Executive Vice Dean, School of Medicine (when Vice Chancellor for Research not available)	Approval by CON Dean with respect to contracts involving CON; approval by COP Dean with respect to contracts involving COP; legal review if appropriate as determined by signature authority holder; authorized position may not sign contracts for which there may be a conflict of interest
178HSC	PC Dash software license and service agreements	Chief Budget and Finance Officer; Chief Administrative Officer	None
179HSC	Invoices and Financial Reports for contracts and grants funded with sponsored awards	HSC Chief Financial Services Officer; Accountant, H4-Post Discipline SC Financial Services	None
180HSC	Agreements regarding credentialing and privileging by proxy as to which providers on the Medical Staff at UNM Hospitals will be providing telehealth and/or telemedicine services at third-party hospitals	Chair, UNM Hospitals Credentials Committee or Executive Director, Medical Staff Affairs	Contracts must also evidence that they have been reviewed and approved as to form by the HSC Office of University Counsel
025PUR	Purchase of goods and/or services for clinical components of HSC other than construction contracts & designated professional services	Executive Director of Financial Planning and Analysis, UNMH <i>(specially authorized by [REDACTED] in 5/17/2012 memorandum)</i> Area Director of Material Management, UNMH	None
036PUR	Goods and/or services for clinical components of HSC, other than construction contracts and designated professional services	UNMH Purchasing Manager	None

Exhibit 6.1 1



██████████'s district) attended the



Legislative activities update - ACOG

m.acog.org › ... › May 2013

Mobile-friendly - ██████████ MD, District VIII legislative chair ... Sixty Fellows, Junior Fellows, and medical students from our district ... MD, District VIII secretary; Dr. ██████████, MD; ██████████, MD, ...

From the editor - ACOG

m.acog.org › ... › May 2014

Mobile-friendly - Dr. ██████████



Junior Fellows | Medical Students - ACOG

m.acog.org › ... › District II

Mobile-friendly - Welcome to the District II Junior Fellow & Medical Student Site! We have made



Web



Maps



News



Shop

Exhibit 6.12



Department of Obstetrics and Gynecology

Date: December 14, 2015

To: [REDACTED] Southwestern Women's Options

Address: [REDACTED]

RE: Termination of Program Letter dated June 2, 2014

Dear [REDACTED]

I am writing to inform you that as of the date of this letter, the University of New Mexico School of Medicine Fellowship in Family Planning is terminating the Program Letter dated June 2, 2014. We are currently seeking another rotation site that better meets the training needs of our Fellows. We very much appreciate your willingness to serve as a rotation site.

Sincerely,

[REDACTED]

Exhibit 6.13

HOUSE OFFICER AFFILIATION AGREEMENT

The Regents of the University of New Mexico, for its public operation known as the Health Sciences Center, specifically for the School of Medicine (the "University"), and Planned Parenthood of New Mexico, Inc. (the "Institution"), a New Mexico domestic non-profit corporation, agree:

RECITALS

- A. The caseload at the Institution is adequate to provide an opportunity for University resident physicians ("House Officers") to obtain practical and didactic exposure to patient management under the supervision of the medical staff of the Institution.
- B. The purposes of this Agreement are:
 - 1. To establish a training and educational program for House Officers while on rotation at the Institution;
 - 2. To ensure a close working relationship between the University and the Institution;
 - 3. To benefit both the University and the Institution through provision of quality medical education and training by allowing participation by House Officers in the delivery of health care services by the medical staff of the Institution;
 - 4. To provide House Officers with opportunities to acquire specific skills and knowledge in designated specialty areas through experience in patient care delivery by qualified physicians; and
 - 5. To enable House Officers to become knowledgeable about operational aspects of various types of health delivery systems.

II. RESPONSIBILITIES OF THE INSTITUTION

- A. The Institution will:
 - 1. Accept for training the number of House Officers to be determined jointly by the Institution and the University.
 - 2. Make available its clinical and related facilities and its personnel to provide quality learning experiences for House Officers during their educational rotation at the Institution under the supervision of qualified Institution personnel.

3. Designate one or more clinical supervisors who will: (a) coordinate the House Officer's clinical education experience, conferences, course and programs; (b) arrange schedules to the degree possible to avoid conflict with other educational courses; and (c) coordinate all aspects of training of House Officers with the appropriate University clinical department chairperson or program director and the Associate Dean for Graduate Medical Education or designee.
 4. Make patients aware that House Officers from the University of New Mexico Health Sciences Center are providing services to patients in Institution's facility(ies) and that they have the right to ask whether House Officers will be involved in their treatment, by either (a) posting a notice to that effect; or (b) ensuring that the House Officer is wearing a University-issued badge identifying him/herself as a resident physician at the University of New Mexico Health Sciences Center.
 5. Permit the University's clinical department chairpersons or program directors to review the Institution's educational program, participate in the selection of clinical supervisors and inspect its clinical facilities.
 6. Permit the University to coordinate all aspects of the educational program with the Institution's clinical supervisors.
 7. Provide House Officers with use of classrooms, storage space, sleeping quarters (while they are on call), dining facilities, dressing and locker room space and similar facilities while they are on rotation at the Institution.
 8. Provide periodic reports as may be required by the University Graduate Medical Education Office or the appropriate University clinical department chairperson or program director.
 9. Adhere to the Accreditation Council on Graduate Medical Education Program Requirements for Residency Education.
- B. If necessary, the Institution will provide emergency medical treatment of House Officers while they are on rotation at the Institution. The cost of such treatment will be paid by the House Officer or the House Officer's third party payor.
- C. The Institution will provide all necessary personnel at levels compatible with provision of quality health care and with the Institution's supervisory responsibility for training of House Officers.

III. RESPONSIBILITIES OF THE UNIVERSITY

- A. The University will:

1. Identify specific House Officers who will be assigned full time or part time for training at the Institution.
 2. Provide the Institution with identification of assigned House Officers and the desired rotational schedule for each House Officer.
 3. Require House Officers to conform to the policies and procedures of the Institution, under the direction of the Institution's designated clinical supervisors.
 4. Assure that House Officers are informed of, and comply with, all applicable Institution rules and regulations.
 5. Assume administrative responsibility for control and discipline of House Officers.
 6. Assure that House Officers are duly licensed as such by the New Mexico Board of Medical Examiners.
 7. Assure that House Officers have appropriate health care coverage and other benefits as provided in Exhibit A in accordance with applicable accreditation standards.
 8. Adhere to the Accreditation Council on Graduate Medical Education Program Requirements for Residency Education.
- B. House Officers will meet all reasonable health standards imposed by applicable laws and regulations or imposed by the Institution. Copies of Institutional standards will be provided by the Institution to the University and the House Officers.
- C. The University faculty member (program director) responsible for the House Officer's rotation at the Institution will send a letter ("Program Letter") to the Institution's medical staff member responsible for the House Officer's supervision at the Institution, that provides the following specific information:
1. The individual at the Institution who is designated to assume administrative, educational and supervisory responsibility for the House Officer;
 2. The educational goals and objectives of the House Officer's rotation at the Institution;
 3. The period of assignment of the House Officer at the Institution, the financial arrangements, and information regarding the House Officer's performance; and

4. The Institution's responsibilities for teaching, supervision and formal evaluation of the House Officer's performance; and
5. The policies and procedures that govern the House Officer's education while on rotation at the Institution.

Upon delivery to the Institution, these Program Letters are incorporated by reference into this Agreement, as if fully set forth herein.

IV. SPECIAL PROVISIONS

- A. This program is educational, and is not designed to replace, nor will it result in the replacement of, employees of the Institution, nor will it impair existing contracts for services. The House Officers will be under the supervision of the Institution's personnel, will not take the place of the Institution's regular personnel in providing health care services to the Institution's patients, and will not provide full and complete technical and/or professional direction of patient care, but will participate in such care with the medical staff of the Institution.
- B. The Institution recognizes that the University has established personnel policies and benefits for House Officers. The Institution will consult with the University Associate Dean for Graduate Medical Education and the designated Program Director when considering: (1) refusing to accept assignment of a House Officer; (2) suspension of a House Officer for any reason; or (3) barring any House Officer from participation for failure to fulfill the terms of this Agreement.
- C. The number and distribution of House Officers among the divisions of the Institution will be agreed upon by the University and the Institution at the beginning of each training period. The Institution specifically reserves the right to make any and all changes it deems necessary to ensure accomplishment of its mission; provided, however, that the Institution will not make any changes after the date agreed upon by the Institution and the University at the beginning of each training period. The Institution will promptly inform the University in writing of any changes, but any such changes will be made at the sole discretion of the Institution.

V. INSURANCE AND LIABILITY

- A. As between the parties, each party acknowledges that it will be responsible for claims or damages arising from personal injury or damage to persons or property to the extent they result from negligence of that party's employees or (in the case of University) House Officers. The University is provided professional liability coverage for its House Officers and University-employed faculty members for their activities at the Institution, as set forth in the New Mexico Tort Claims Act, Sections 41-4-1 et seq. NMSA 1978, as amended. The liability of the House Officers and faculty employed by the University will be subject in all cases to the

limitations and immunities of the New Mexico Tort Claims Act. Subject to the New Mexico Tort Claims Act, the University will indemnify, defend and hold harmless Institution and its employees, officers, agents, and representatives from and against any and all loss, damage, liability or claims (including reasonable attorneys' fees) arising from the negligent acts or omissions of University, House Officer, or its employees, in connection with this Agreement, provided that the indemnities herein do not extend to claims arising from or in any way related to the negligent acts or omissions of Institution, its employees or agents.

- B. If a complaint is made, or a claim or suit is initiated or filed naming or otherwise involving a House Officer or a University employee, the Institution will immediately provide written notice to the Graduate Medical Education Office of the School of Medicine, the University's Health Sciences Center Risk Management Department, and the University's Health Sciences Center Office of University Counsel. If a claim or suit is filed or initiated against the Institution, naming or otherwise involving alleged actions or omissions of a House Officer, the University will manage and control all aspects of the defense on behalf of the House Officer in accordance with the New Mexico Tort Claims Act. To the extent permitted by the New Mexico Tort Claims Act, the University will coordinate its defense with that of the Institution.

VI. TERM AND TERMINATION

This Agreement will become effective on 1 May 2011 and will continue through 30 June 2015 unless earlier terminated by either party by providing written notice of intent to terminate to the other party at least sixty (60) days prior to the proposed date of termination.

VII. REIMBURSEMENT

The University will be responsible for the salary and fringe benefits of House Officers for the period the House Officers perform services at the Institution. All House Officers are paid the same amount at each level of appointment, regardless of assignment.

VIII. HIPAA COMPLIANCE

- A. The parties will comply with the applicable provisions of HIPAA and any current and future regulations promulgated thereunder, including without limitation, the federal privacy regulations, the federal security standards, and the federal standards for electronic transactions (collectively, the "HIPAA Requirements"). The parties will not use or further disclose any Protected Health Information or Individually Identifiable Health Information (as such terms are defined in the HIPAA regulations), other than as permitted by the HIPAA Requirements and the terms of this Agreement.

- B.** The University will ensure that House Officers have been provided training with regard to the HIPAA Requirements, and will provide Institution with a certificate of training evidencing that this requirement has been met. Additionally, the Institution may require each House Officer to sign a Confidentiality Agreement and an Acknowledgement that the House Officer has received Institution's Notice of Privacy Practices.

IX. MISCELLANEOUS

- A. Entire Agreement.** This Agreement and the Program Letters referenced in Section III-C of this Agreement represent the entire understanding between the parties and supersede any prior agreements or understandings with respect to the subject matter of this Agreement.
- B. Waiver of Breach.** The waiver by either party of a breach or violation of any provision of this Agreement will not operate as or be construed as a waiver of any subsequent breach of this Agreement.
- C. Modifications.** No changes, amendments or alterations to this Agreement will be effective unless in writing and signed by both parties.
- D. Non-Assignability.** This Agreement will not be assigned by either party, nor will the duties imposed upon either party by this Agreement be delegated, subcontracted, or transferred by either party, in whole or in part, without the prior written consent of the other party.
- E. Governing Law.** This Agreement will be construed, interpreted, governed and enforced in accordance with the statutes, judicial decisions, and other laws of the State of New Mexico.
- F. Severability.** The invalidity or unenforceability of any term or provision of this Agreement will in no way affect the validity or enforceability of any other term or provision to the extent permitted by law.
- G. Marketing Materials.** Neither the University nor the Institution will use the other's name in any publicity or advertising materials without prior written consent of the other party; provided, however, that either party may indicate to individual House Officers or potential House Officers the existence and scope of the training programs available at the Institution.
- H. Confidentiality**
- 1. Patient and House Officer Records.** The confidentiality of patients' medical records and House Officers' academic records will be maintained by the parties in accordance with applicable federal and state laws and regulations.

2. **Compensation.** The Institution and the University will not disclose the compensation payable to the University pursuant to this Agreement, except to the extent required by applicable laws or regulations or as may be required to carry out the terms of this Agreement.
- I. **Retention of Records.** The Institution and the University will maintain detailed records associated with assignment of House Officers and payments to the University pursuant to this Agreement for a period of at least five years after termination of this Agreement, and will allow access for inspection by the Institution, the University, the Secretary for Health and Human Services, the Comptroller General and the Inspector General to such records for the purpose of verifying costs associated with provision of services under this Agreement.
- J. **Relationship of Parties.** House Officers and employees of the University will not be considered employees of the Institution for any purpose, including, but not limited to, workers' compensation, insurance, bonding or any other benefits afforded to employees of the Institution. As trainees working under the direct control of Institution's clinical instructors, House Officers will be part of Institution's "workforce" for purposes of compliance with the Health Insurance Portability and Accountability Act of 1996, as codified at 42 U.S.C. Section 1320d ("HIPAA"). Neither party has any express or implied authority to assume or create any obligation or responsibility on behalf of or in the name of the other party.
- K. **Cooperation and Dispute Resolution.** The parties agree that, to the extent compatible with the separate and independent management of each, they will maintain effective liaison and close cooperation. If a dispute arises related to the obligations or performance of either party under this Agreement, representatives of the parties will meet in good faith to resolve the dispute.
- L. **Third Parties.** Nothing in this Agreement, express or implied, is intended to confer any rights, remedies, claims, or interests upon a person not a party to this Agreement.
- M. **Eligibility for Participation in Government Programs.** Each party represents that neither it, nor any of its management or any other employees or independent contractors who will have any involvement in the services or products supplied under this Agreement, have been excluded from participation in any government healthcare program, debarred from or under any other federal program (including but not limited to debarment under the Generic Drug Enforcement Act), or convicted of any offense defined in 42 U.S.C. Section 1320a-7, and that it, its employees, and independent contractors are not otherwise ineligible for participation in federal healthcare programs. Further, each party represents that it is not aware of any such pending action(s) (including criminal actions) against it or its employees or independent contractors. Each party shall notify the other

party immediately upon becoming aware of any pending or final action in any of these areas.

N. Notices. Any notice required to be given pursuant to the terms and provisions of this Agreement will be in writing and will be sent by certified mail, return receipt requested, postage prepaid, as follows:

To the University at:

Office of Graduate Medical Education
[REDACTED]

To the Institution at:

Planned Parenthood of New Mexico, Inc
[REDACTED]

O. Binding Effect. This Agreement is binding upon, and inures to the benefit of, the parties to this Agreement and their respective successors and assigns.

INSTITUTION: ~~Planned~~ Parenthood of New Mexico, Inc
[REDACTED]

Date: 6/5/2012

UNIVERSITY: ~~REGENTS OF THE UNIVERSITY OF NEW MEXICO,~~
FOR THE SCHOOL OF MEDICINE
[REDACTED]

Date: 6/13/12

Approved as to form:
[REDACTED]

Date: 6/11/12

Exhibit 6.14

HOUSE OFFICER AFFILIATION AGREEMENT

The Regents of the University of New Mexico, for its public operation known as the Health Sciences Center, specifically for the School of Medicine (the "University"), and Planned Parenthood of the Rocky Mountains, Inc. (the "Institution"), agree:

RECITALS

- A. The caseload at the Institution is adequate to provide an opportunity for University resident physicians ("House Officers") to obtain practical and didactic exposure to patient management under the supervision of the medical staff of the Institution.
- B. The purposes of this Agreement are:
 - 1. To establish a training and educational program for House Officers while on rotation at the Institution;
 - 2. To ensure a close working relationship between the University and the Institution;
 - 3. To benefit both the University and the Institution through provision of quality medical education and training by allowing participation by House Officers in the delivery of health care services by the medical staff of the Institution;
 - 4. To provide House Officers with opportunities to acquire specific skills and knowledge in designated specialty areas through experience in patient care delivery by qualified physicians; and
 - 5. To enable House Officers to become knowledgeable about operational aspects of various types of health delivery systems.

I. RESPONSIBILITIES OF THE INSTITUTION

- A. The Institution will:
 - 1. Accept for training the number of House Officers to be determined jointly by the Institution and the University.
 - 2. Make available its clinical and related facilities and its personnel to provide quality learning experiences for House Officers during their educational rotation at the Institution under the supervision of qualified Institution personnel.

3. Designate one or more clinical supervisors who will: (a) coordinate the House Officer's clinical education experience, conferences, course and programs; (b) arrange schedules to the degree possible to avoid conflict with other educational courses; and (c) coordinate all aspects of training of House Officers with the appropriate University clinical department chairperson or program director and the Associate Dean for Graduate Medical Education or designee.
 4. Make patients aware that House Officers from the University of New Mexico Health Sciences Center are providing services to patients in Institution's facility(ies) and that they have the right to ask whether House Officers will be involved in their treatment, by either (a) posting a notice to that effect; or (b) ensuring that the House Officer is wearing a University-issued badge identifying him/herself as a resident physician at the University of New Mexico Health Sciences Center.
 5. Permit the University's clinical department chairpersons or program directors to review the Institution's educational program, participate in the selection of clinical supervisors and inspect its clinical facilities.
 6. Permit the University to coordinate all aspects of the educational program with the Institution's clinical supervisors.
 7. Provide House Officers with use of classrooms, storage space, sleeping quarters (while they are on call), dining facilities, dressing and locker room space and similar facilities while they are on rotation at the Institution.
 8. Provide periodic reports as may be required by the University Graduate Medical Education Office or the appropriate University clinical department chairperson or program director.
 9. Adhere to the Accreditation Council on Graduate Medical Education Program Requirements for Residency Education.
- B. If necessary, the Institution will provide emergency medical treatment of House Officers while they are on rotation at the Institution. The cost of such treatment will be paid by the House Officer or the House Officer's third party payor.
- C. The Institution will provide all necessary personnel at levels compatible with provision of quality health care and with the Institution's supervisory responsibility for training of House Officers.

II. RESPONSIBILITIES OF THE UNIVERSITY

- A. The University will:

1. Identify specific House Officers who will be assigned full time or part time for training at the Institution.
2. Provide the Institution with identification of assigned House Officers and the desired rotational schedule for each House Officer.
3. Require House Officers to conform to the policies and procedures of the Institution, under the direction of the Institution's designated clinical supervisors.
4. Assure that House Officers are informed of, and comply with, all applicable Institution rules and regulations.
5. Assume administrative responsibility for control and discipline of House Officers.
6. Assure that House Officers are duly licensed as such by the New Mexico Board of Medical Examiners.
7. Assure that House Officers have appropriate health care coverage and other benefits as provided in Exhibit A in accordance with applicable accreditation standards.
8. Adhere to the Accreditation Council on Graduate Medical Education Program Requirements for Residency Education.

B. House Officers will meet all reasonable health standards imposed by applicable laws and regulations or imposed by the Institution. Copies of Institutional standards will be provided by the Institution to the University and the House Officers.

C. The University faculty member (program director) responsible for the House Officer's rotation at the Institution will send a letter ("Program Letter") to the Institution's medical staff member responsible for the House Officer's supervision at the Institution, that provides the following specific information:

1. The individual at the Institution who is designated to assume administrative, educational and supervisory responsibility for the House Officer;
2. The educational goals and objectives of the House Officer's rotation at the Institution;

3. The period of assignment of the House Officer at the Institution, the financial arrangements, and information regarding the House Officer's performance; and
4. The Institution's responsibilities for teaching, supervision and formal evaluation of the House Officer's performance; and
5. The policies and procedures that govern the House Officer's education while on rotation at the Institution.

Upon delivery to the Institution, these Program Letters are incorporated by reference into this Agreement, as if fully set forth herein.

III. SPECIAL PROVISIONS

- A. This program is educational, and is not designed to replace, nor will it result in the replacement of, employees of the Institution, nor will it impair existing contracts for services. The House Officers will be under the supervision of the Institution's personnel, will not take the place of the Institution's regular personnel in providing health care services to the Institution's patients, and will not provide full and complete technical and/or professional direction of patient care, but will participate in such care with the medical staff of the Institution.
- B. The Institution recognizes that the University has established personnel policies and benefits for House Officers. The Institution will consult with the University Associate Dean for Graduate Medical Education and the designated Program Director when considering: (1) refusing to accept assignment of a House Officer; (2) suspension of a House Officer for any reason; or (3) barring any House Officer from participation for failure to fulfill the terms of this Agreement.
- C. The number and distribution of House Officers among the divisions of the Institution will be agreed upon by the University and the Institution at the beginning of each training period. The Institution specifically reserves the right to make any and all changes it deems necessary to ensure accomplishment of its mission; provided, however, that the Institution will not make any changes after the date agreed upon by the Institution and the University at the beginning of each training period. The Institution will promptly inform the University in writing of any changes, but any such changes will be made at the sole discretion of the Institution.

IV. INSURANCE AND LIABILITY

- A. As between the parties, each party acknowledges that it will be responsible for claims or damages arising from personal injury or damage to persons or property to the extent they result from negligence of that party's employees or (in the case

of University) House Officers. Institution understands that University is not indemnifying Institution for the acts or omissions to act of University's House Officers, faculty, and/or employees. The liability of the University's House Officers, faculty, and employees will be subject in all cases to the limitations and immunities of the New Mexico Tort Claims Act, Sections 41-4-1 *et seq.* NMSA 1978, as amended.

- B. The New Mexico Risk Management Division provides professional liability coverage of University, its House Officers, faculty, and employees for their health care instructional activities at the Institution as set forth in the New Mexico Tort Claims Act.
- C. If a complaint is made, or a claim or suit is initiated or filed naming or otherwise involving a House Officer or a University employee, the Institution will immediately provide written notice to the University's Graduate Medical Education Office and Health Sciences Center Office of University Counsel. If a claim or suit is filed or initiated against the Institution, naming or otherwise involving alleged actions or omissions of a House Officer, the University will manage and control all aspects of the defense on behalf of the House Officer in accordance with the New Mexico Tort Claims Act. To the extent permitted by the New Mexico Tort Claims Act, the University will coordinate its defense with that of the Institution.

V. TERM AND TERMINATION

This Agreement will become effective on 1 May 2013 and will continue through 30 June 2018 unless earlier terminated by either party by providing written notice of intent to terminate to the other party at least sixty (60) days prior to the proposed date of termination.

VI. REIMBURSEMENT

The University will be responsible for the salary and fringe benefits of House Officers for the period the House Officers perform services at the Institution. All House Officers are paid the same amount at each level of appointment, regardless of assignment.

VII. HIPAA COMPLIANCE

- A. The parties will comply with the applicable provisions of HIPAA and any current and future regulations promulgated thereunder, including without limitation, the federal privacy regulations, the federal security standards, the federal standards for electronic transactions, and the Health Information Technology for Economic and Clinical Health ("HITECH") Act that is contained within the American Recovery and Reinvestment Act of 2009, P.L. 111-5 (collectively, the "HIPAA Requirements") and with any and all of Facility's policies, procedures, and

standards adopted from time to time with respect to the HIPAA Requirements. The parties will not use or further disclose any Protected Health Information or Individually Identifiable Health Information (as such terms are defined in the HIPAA regulations), other than as permitted by the HIPAA Requirements and the terms of this Agreement.

- B. The University will ensure that House Officers have been provided training with regard to the HIPAA Requirements, and will provide Institution with a certificate of training evidencing that this requirement has been met. Additionally, the Institution may require each House Officer to sign a Confidentiality Agreement and an Acknowledgement that the House Officer has received Institution's Notice of Privacy Practices.

VIII. MISCELLANEOUS

- A. **Entire Agreement.** This Agreement and the Program Letters referenced in Section III-C of this Agreement represent the entire understanding between the parties and supersede any prior agreements or understandings with respect to the subject matter of this Agreement.
- B. **Waiver of Breach.** The waiver by either party of a breach or violation of any provision of this Agreement will not operate as or be construed as a waiver of any subsequent breach of this Agreement.
- C. **Modifications.** No changes, amendments or alterations to this Agreement will be effective unless in writing and signed by both parties.
- D. **Non-Assignability.** This Agreement will not be assigned by either party, nor will the duties imposed upon either party by this Agreement be delegated, subcontracted, or transferred by either party, in whole or in part, without the prior written consent of the other party.
- E. **Governing Law.** This Agreement will be construed, interpreted, governed and enforced in accordance with the statutes, judicial decisions, and other laws of the State of New Mexico, without regard to its conflict of law provisions.
- F. **Severability.** The invalidity or unenforceability of any term or provision of this Agreement will in no way affect the validity or enforceability of any other term or provision to the extent permitted by law.
- G. **No Inducement to Refer.** Nothing contained in this Agreement will require either party or any physician of a party to admit or refer any patients to the other party's facilities. The parties enter into this Agreement with the intent of conducting their relationship in full compliance with applicable federal, state and local law, including the Medicare/Medicaid Anti-Fraud and Abuse Amendments

and the Physician Ownership and Referral Act (commonly known as the Stark Law). Notwithstanding any unanticipated effect of any of the provisions herein, neither party will intentionally conduct itself under the terms of this Agreement in a manner to constitute a violation of these provisions.

H. Confidentiality

1. **Patient and House Officer Records.** The confidentiality of patients' medical records and House Officers' academic records will be maintained by the parties in accordance with applicable federal and state laws and regulations.
2. **Compensation.** The Institution and the University will not disclose the compensation payable to the University pursuant to this Agreement, except to the extent required by applicable laws or regulations or as may be required to carry out the terms of this Agreement.

I. Retention of Records. The Institution and the University will maintain detailed records associated with assignment of House Officers and payments to the University pursuant to this Agreement for a period of at least five years after termination of this Agreement, and will allow access for inspection by the Institution, the University, the Secretary for Health and Human Services, the Comptroller General and the Inspector General to such records for the purpose of verifying costs associated with provision of services under this Agreement.

J. Relationship of Parties. House Officers and employees of the University will not be considered employees of the Institution for any purpose, including, but not limited to, workers' compensation, insurance, bonding or any other benefits afforded to employees of the Institution. As trainees working under the direct control of Institution's clinical instructors, House Officers will be part of Institution's "workforce" for purposes of compliance with the Health Insurance Portability and Accountability Act of 1996, as codified at 42 U.S.C. Section 1320d ("HIPAA"). Neither party has any express or implied authority to assume or create any obligation or responsibility on behalf of or in the name of the other party.

K. Cooperation and Dispute Resolution. The parties agree that, to the extent compatible with the separate and independent management of each, they will maintain effective liaison and close cooperation. If a dispute arises related to the obligations or performance of either party under this Agreement, representatives of the parties will meet in good faith to resolve the dispute.

L. Third Parties. Nothing in this Agreement, express or implied, is intended to confer any rights, remedies, claims, or interests upon a person not a party to this Agreement.

M. **Eligibility for Participation in Government Programs.** Each party represents that neither it, nor any of its management or any other employees or independent contractors who will have any involvement in the services or products supplied under this Agreement, have been excluded from participation in any government healthcare program, debarred from or under any other federal program (including but not limited to debarment under the Generic Drug Enforcement Act), or convicted of any offense defined in 42 U.S.C. Section 1320a-7, and that it, its employees, and independent contractors are not otherwise ineligible for participation in federal healthcare programs. Further, each party represents that it is not aware of any such pending action(s) (including criminal actions) against it or its employees or independent contractors. Each party shall notify the other party immediately upon becoming aware of any pending or final action in any of these areas.

N. **Notices.** Any notice required to be given pursuant to the terms and provisions of this Agreement will be in writing and will be sent by certified mail, return receipt requested, postage prepaid, as follows:

To the University at: Office of Graduate Medical Education

[REDACTED]

To the Institution at: Planned Parenthood of the Rocky Mountains, Inc.

[REDACTED]

O. **Binding Effect.** This Agreement is binding upon, and inures to the benefit of, the parties to this Agreement and their respective successors and assigns.

INSTITUTION: Planned Parenthood of the Rocky Mountains, Inc.

[REDACTED]

Date: 6/10/13

**UNIVERSITY: REGENTS OF THE UNIVERSITY OF NEW MEXICO,
FOR THE SCHOOL OF MEDICINE**

[REDACTED]

Date: 6/10/13

Approved as to form:

[Redacted Signature]

[Redacted Title]

Date: 6/12/13

Exhibit 6.15

University of New Mexico- OB/GYN Department

May 2016

UNM Doctor	UNM Doctor	UNM Doctor	UNM Doctor	UNM Doctor	UNM Doctor	UNM Doctor	UNM Doctor	UNM Doctor	UNM Doctor	UNM Doctor
Su 1										
Mo 2										
Tu 3										
We 4									Planned Parenthood AM	
Th 5									Planned Parenthood PM	
Fr 6										
Sa 7										
Su 8										
Mo 9										
Tu 10										
We 11										
Th 12										
Fr 13										
Sa 14										
Su 15										
Mo 16										
Tu 17										
We 18										
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Su 22										
Mo 23										
Tu 24										
We 25										
Th 26										
Fr 27										
Sa 28										
Su 29										
Mo 30										
Tu 31										

Exhibit 6.16

RECEIVED

FEB 18 2011

SCHOOL OF MEDICINE
ACADEMIC AFFAIRS

VOLUNTEER FACULTY PROFESSIONAL LIABILITY INSURANCE

EXTENSION OF NEW MEXICO TORT CLAIMS ACT

The individual identified below is a member of the University of New Mexico School of Medicine Volunteer Faculty. By serving as Volunteer Faculty, the New Mexico Tort Claims Act recognizes this individual as a "public employee without compensation." It is the policy of the UNM School of Medicine that the New Mexico Tort Claims Act professional liability insurance coverage provided to University employees shall be extended to provide coverage for the duties and activities performed by the individual Volunteer Faculty members that meet the following criteria:

1. The Volunteer Faculty member will perform only the duties and activities that have been assigned to them by the Chairperson of his/her academic department.
2. The Volunteer Faculty member does not have other insurance coverage that provides coverage of his/her duties and activities at the University as assigned by the Chairperson of his/her academic department.

This extension of insurance coverage shall remain in effect so long as the individual continues as a Volunteer Faculty member in good standing.

[REDACTED]
Department of Obstetrics and Gynecology

REQUESTED BY:

Effective Dates of coverage:

APPROVED BY:

Exhibit 6.17



At a Glance Reference Information:

Academic Affairs:

505-272-8268

Security (Id Badge/Lobocard):

505-272-1757

Johnson Center:

505-277-4347

UNM Ticket Office:

1-877-664-8661

UNM Championship Golf Course:

505-277-4546

Health Sciences Library:

505-272-2311

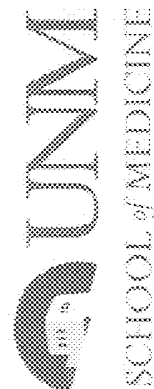
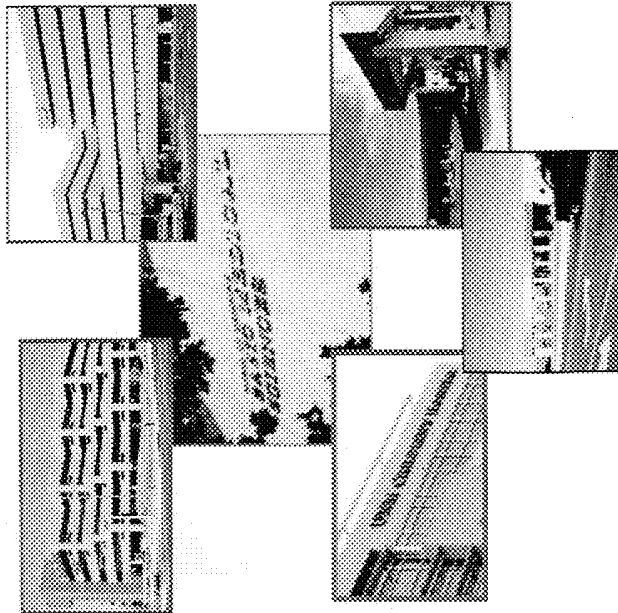
New Mexico Educators Federal Credit Union:

505-888-8920

UNM Welcome Center

505-277-1989

Volunteer Faculty Benefits



Academic Affairs

BMSB Rm. 180, MSC 08 4730

Phone: 505-272-8268

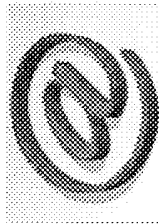
Fax: 505-272-6581

<http://hsc.unm.edu/som/academicaffairs/>



Get your email!

As an adjunct volunteer faculty member, HSLIC will provide you with an HSC email account upon request.



Speak with your sponsoring department for additional information regarding your email account



Recreational Services!

Contact Recreational Services for an updated calendar and class schedule

Phone: 277-4347

reesves.unm.edu/index.html

Utilize Johnson Center to stay healthy and fit! With a wide variety of activities, classes and equipment, there's no reason to join a gym!



Your UNM Lobocard!

Faculty at UNM find the Lobocard handy for access to library services, identification and for all other benefits. It will be effective during the two year period that your volunteer faculty appointment is active.



Enjoy discounted Lobo sporting events and many of Popejoy's shows, symphony concerts, musical soloists and artists of international caliber, world-renowned ballet and modern dance companies, and noted speakers from a broad spectrum of disciplines.

UNM Ticket Office:

1-877-664-8661 Toll Free or 505-925-5858

<http://www.unmtickets.com/>

(10 AM to 4PM MST, Monday thru Friday)

*Please note: We are unable to provide tuition remission benefits

BENEFITS

HEALTH SCIENCES CENTER LIBRARY -- Access the HSC Library's online databases and extensive collection of over 600 full-text online journals check-out privileges; and educational classes

NEW MEXICO EDUCATORS FEDERAL CREDIT UNION -- membership

JOHNSON CENTER -- Facilities include the main and auxiliary gyms, handball courts, weight room, tennis courts and Olympic-size pool

ATHLETIC EVENTS -- 50% discount on two season tickets for football, and men's or women's basketball games

POPEJOY CULTURAL SERIES -- discounts on event tickets

MUSEUMS -- Free admission to the Fine Arts Museum, Maxwell Museum of Anthropology, Geology Museum, Student Art Gallery, and Museum of Southwestern Biology

LIBRARIES -- Access to the Law Library on North Campus. The libraries on main campus include: Zimmerman Library, Fine Arts Center, Parish Library in the Graduate School of Management, Tireman Learning Materials Library in the Educational Complex and Centennial Science/Engineering Library

UNIVERSITY PRESS -- Publications may be purchased at a discount at UNM bookstores

GOLF -- Reduced rates on quarterly/annual memberships for the 9-hole course. Discounts of the 18-hole Championship course may be available.

RECREATIONAL EQUIPMENT -- Nominal fees to rent tents, camping gear, backpacks, snowshoes, cross-country skis, volleyball sets, etc.

Exhibit 6.18



[REDACTED]@gmail.com>

Re: two questions

2 messages

[REDACTED]@gmail.com>
To: [REDACTED]@gmail.com>

Tue, Feb 16, 2016 at 1:12 PM

Hi [REDACTED]

Apologies but for a variety of reasons which I won't bore you with Friday won't be a good day to stop by. Mostly personal and one deadline I need to meet!

I'll send the article tonight when I'm on my computer as opposed to this phone. I'll try here in the clinic but the wifi sucks and a lot of websites are blocked.

And yes of course I'll do the weird ABOG thing!

wild about Scalia. The partisan posturing is already ugly. Fascinating how we've elected children to high office.

sc

> On Feb 16, 2016, at 10:50, [REDACTED]@gmail.com> wrote:

>

> Hi [REDACTED],

>

> How are you doing??? Any chance of stopping by on Friday to say hello and check in?

>

> Once again, I'm having problems accessing the UNMHC library system. I'm trying to get an article from Contraception, 2014 November ;90(5) 476-9. Unfortunately, we have the December 2014 issue but not the November issue. Do you have a way to get the article?

>

> And..once again, it's time to sign up for the yearly ABOG MOC scam. Would you be able to attest my fine moral character. If so, I can e-mail you the form to sign and you can either send it back or fax it to ABOG directly.

>

> I take it that no one in the clinic, yourself included is mourning the loss of our supreme court (in) justice..

>

> Hopefully, see you soon,

> [REDACTED]

[REDACTED]@gmail.com>
To: [REDACTED]@gmail.com>

Tue, Feb 16, 2016 at 7:22 PM

Here you go [REDACTED]!

[Quoted text hidden]

 **2014_Mortality of abortion and other outpt procedures.pdf**
161K

Exhibit 6.19

McDermott Will & Emery

Boston Brussels Chicago Dallas Düsseldorf Frankfurt Houston London Los Angeles Miami
Milan Munich New York Orange County Paris Rome Seoul Silicon Valley Washington, D.C.

Strategic alliance with MWE China Law Offices (Shanghai)



February 16, 2016

BY U.S. MAIL AND EMAIL

The Honorable Marsha Blackburn
Attn: March Bell, Frank Scaturro, Esq.,
Heather Sawyer, Esq. for Ranking Member Jan Schakowsky
House Select Panel on Infant Lives
H2-316 Ford House Office Building
Washington, DC 20515

Re: Information Request to University of New Mexico Health Sciences Center

Dear Chairwoman Blackburn:

By letter dated January 6, 2016, you requested that the University of New Mexico Health Sciences Center (UNMHSC), provide the Select Panel with certain information related to the UNMHSC's research activities involving fetal tissue and to a significant degree, any abortion services provided at UNMHSC, none of which result in transfers of fetal tissue.

In an email dated January 22, 2016, the Panel's staff agreed to certain limits on the Panel's 19 requests in your January 6, 2016 letter.¹ Subsequently, on January 29, 2016, UNMHSC produced its first response to your information request.

In its first response on January 29, 2016 UNMHSC stated, as it reiterates in today's submission, that UNMHSC does not purchase or sell fetal tissue, nor does it transfer fetal tissue in exchange for any other valuable consideration, and it has never been UNMHSC's practice to do so. All fetal tissue obtained by UNMHSC is donated.

Enclosed you will find UNMHSC's second and final submission in response to your letter, which contains interrogatory responses to items 9, 11, 14, and 19 and materials responsive to items 4, 6-16. The materials enclosed consist of 297 documents, totaling 3,121 pages, and are Bates labeled UNM00001 – UNM03121. This submission completes UNMHSC's voluntary

¹ Following the receipt of your letter, we spoke with staff of the select panel by telephone on January 13, 2016 and received email correspondence from the staff on January 22, 2016, regarding the requests. Through our communication, we: (1) agreed to produce materials responsive to the requests in a "rolling" process, with our first production on January 29, 2016 and our second on or around February 15, 2016; (2) agreed to certain limits to some of the items in the request letter; (3) agreed to submit interrogatory responses to certain requests herein. February 15, 2016 was the President's Day holiday, so we have agreed with staff to submit production on February 16, 2016.

cooperation with your letter request for information dated January 6, 2016 as agreed with your staff.

About UNMHSC

UNMHSC is the only academic medical center in the State of New Mexico, containing the state's only medical school, only Level I Trauma Center, only Children's Hospital, and only designated Comprehensive Cancer Center. It treats over 235,000 patients each year. The UNMHSC employs approximately 8,000 people in Albuquerque, and generates 19,500 jobs throughout the state. Its revenue totals over \$1.6 billion per year.

Some of UNMHSC's most significant discoveries have arisen from its research involving fetal tissue. These have led to remarkable decreases in the mortality and morbidity of extremely premature babies and increased the chances for survivability and better quality of life at younger and younger gestational ages. These discoveries have directly improved the health and well-being of infants throughout New Mexico and around the world.

UNMHSC is mindful of the diverse and highly charged opinions surrounding induced abortion and research involving fetal tissue and endorses strong ethical practices that separate the decision to have an abortion from the decision to donate tissue for research. Consequently, UNMHSC has signed onto a letter from the American Association of Medical Colleges supporting fetal tissue research and strong ethical practices with respect to research involving tissue obtained from fetuses. Moreover, UNMHSC has developed a comprehensive Code of Ethical Conduct and compliance programs in this area.

Oversight for all research at UNMHSC is provided in the form of Institutional Review Boards, which ensure that all federal regulations and laws are followed regarding research studies. The federal regulations are premised upon and follow what is known as the *Belmont Report*, which set forth strong ethical guidelines for all research involving human subjects around respect for persons, beneficence and justice. UNMHSC maintains an even higher ethical and compliance standard for its research than is required by the federal government through its accreditation by the American Association of Human Research Participation.

Confidentiality

The interrogatory responses and documents UNMHSC is submitting today contain information that could easily lead to the identity of the individuals referenced therein. The atmosphere surrounding the issue of fetal tissue research has become highly charged, as evidenced by the deadly attack at a Planned Parenthood clinic in Colorado in November 2015, as well as the specific death threat received by another individual that I previously shared with your staff. Accordingly, we respectfully request that Members and staff treat as highly confidential and sensitive both the interrogatory responses provided today and the forthcoming production of materials, all of which will be marked "Confidential" as appropriate.

The Honorable Marsha Blackburn
February 16, 2016
Page 3

Moreover, some of the information produced today is proprietary and confidential pursuant to the terms of a research agreement. These materials have been marked accordingly. Finally, the research methodology and results disclosed in today's production are confidential and proprietary, and if disclosed, could harm the researchers, the University, and impede the University's fulfillment of its purpose.

Please do not hesitate to contact me, or in my absence my colleague [REDACTED] if you have questions.

Sincerely,

[REDACTED]

Enclosure

**UNMHSC's Second Submission to House Select Panel
Response to Information Request Dated January 6, 2016**

- 1) **A list of all entities, including firms, corporations, non-profit organizations, and educational institutions, from which any UNMHSC entities receive or procure fetal tissue.**

UNMHSC Response: UNMHSC is adding to its response from January 29, for further clarity:

The only entity from which UNMHSC receives fetal tissue is Southwestern Women's Options in Albuquerque, NM. The tissue is donated at no cost to UNMHSC and it is picked up at the clinic by UNMHSC staff. UNMHSC does not purchase or sell fetal tissue, nor does it transfer fetal tissue in exchange for any other valuable consideration.

- 2) **A list of all entities, including firms, corporations, non-profit organizations, and educational institutions, along with identification of responsible individuals, to or from which any UNMHSC entities purchase, sell, donate, or otherwise receive fetal tissue.**

UNMHSC Response: UNMHSC is adding to its response from January 29, for further clarity:

UNMHSC does not purchase or sell fetal tissue, nor does it transfer fetal tissue in exchange for any other valuable consideration.

The only entity from which UNMHSC receives fetal tissue is Southwestern Women's Options in Albuquerque, NM. The tissue is donated at no cost to UNMHSC and it is picked up at the clinic by UNMHSC staff.

UNMHSC has shared fetal tissue with three research collaborators outside of UNMHSC. One researcher is currently at the University of South Florida (previously worked at University of Alabama, Birmingham and University of Illinois, Chicago). The second researcher is at the University of Ottawa in Canada (previously worked at University of Edmonton). The third researcher is at the University of California San Francisco. No consideration is exchanged for the tissue as part of these collaborative research projects.

UNMHSC pays the cost of shipping for tissue sent within the United States to the U.S.-based researchers. The Canada-based researcher provides a Federal Express account number to UNMHSC for its shipments to Canada. UNMHSC staff follows all Federal Express shipment requirements for potentially biohazardous material.

**UNMHSC's Second Submission to House Select Panel
Response to Information Request Dated January 6, 2016**

- 3) **A list of all entities, including firms, corporations, non-profit organizations, and educational institutions, to which any UNMHSC entities transferred, subcontracted, or sold any business interest or business assets related to the procurement or sale of fetal tissue.**

UNMHSC Response: Please see UNMHSC's response dated January 29, 2016, which is re-printed here for your reference:

None exist.

- 4) **An organizational chart that details all personnel and supervisory personnel among UNMHSC entities, along with a description of each of their job responsibilities, for anyone whose responsibilities would include handling, researching, preparing for research, storing, or disposing fetal tissue.**

Note: Per email correspondence with staff dated January 22, 2016, the panel has agreed to accept identification of individuals on the organization chart by position at UNMHSC rather than by name.

UNMHSC Response: Responsive documents are enclosed.

- 5) **All communications, correspondence, agreements, emails, telephone messages, and purchase orders, bills of sale, or any other documents reflecting any payments between any of the UNMHSC entities and any entity from which a UNMHSC entity has procured fetal tissue.**

UNMHSC Response: Please see UNMHSC's response dated January 29, 2016, which is re-printed here for your reference:

UNMHSC has found no documents responsive to this request.

- 6) **All communications, correspondence, agreements, emails, telephone messages, and purchase orders or bills of sale between any personnel of the School of Medicine, Health Sciences Center, Center for Reproductive Health, Young Women's Clinic, Division of Family Planning, Department of Obstetrics and Gynecology, Department of Pathology, Department of Family and Community Medicine, Family Medicine Center, Sandoval Regional Medical Center, Maternal and Child Health Service, Division of Neonatology, and the Developmental Research, Education, and Mentoring (DREAM) Laboratory; and any executive or legislative officials or other employees of the government of the United States, the state of New Mexico, or of any other states, including of any municipality within the State of New Mexico or any other states.**

**UNMHSC's Second Submission to House Select Panel
Response to Information Request Dated January 6, 2016**

Note: Per email correspondence with staff dated January 22, 2016, the panel has agreed to limit this request to the context of abortion, infants that survive the abortion procedure, and the handling of or any transactions involving fetal tissue.

UNMHSC Response: Responsive documents are enclosed.

- 7) **All financial statements, communications, correspondence, agreements, emails, telephone messages, and purchase orders, bills of sale, or any other documents that identify any federal, state, or local government funds received by the School of Medicine, Health Sciences Center, Center for Reproductive Health, Young Women's Clinic, Division of Family Planning, Department of Obstetrics and Gynecology, Department of Pathology, Department of Family and Community Medicine, Family Medicine Center, Sandoval Regional Medical Center, Maternal and Child Health Service, Division of Neonatology, and the Developmental Research, Education, and Mentoring (DREAM) Laboratory.**

Note: Per email correspondence with staff dated January 22, 2016, the panel has agreed to limit this request to the context of abortion, infants that survive the abortion procedure, and the handling of or any transactions involving fetal tissue.

UNMHSC Response: Responsive documents are enclosed.

- 8) **All communications, protocols, and agreements, whether internal or external, that direct the personnel of any UNMHSC entities with respect to the handling, storage, transport, or disposal of fetal tissue, including but not limited to training materials, guidance documents, memoranda, emails, telephone messages, and purchase orders or bills of sale.**

UNMHSC Response: Responsive documents are enclosed.

- 9) **All communications, protocols, and agreements that relate to the transfer of patients from one or more UNMHSC entities to another UNMHSC entity for abortion procedures, or between one or more UNMHSC entities and an outside clinic or other entity, including information on the method by which patient consent is obtained for abortion procedures and use of fetal tissue.**

Note: Per email correspondence with staff dated January 22, 2016, the panel has agreed to accept an interrogatory answer along with documents responsive to this request.

UNMHSC Response: UNMHSC does not transfer patients between UNMHSC entities or to outside clinics for the purpose of obtaining or providing abortion procedures. Medical standards of practice and ethics would require that if, during the course of any medical procedure, including an abortion, a patient medically requires a transfer to

**UNMHSC's Second Submission to House Select Panel
Response to Information Request Dated January 6, 2016**

another facility for care, that transfer should be effected. That might result in a procedure that began at one facility being completed at another facility.

UNM Hospital provides medical screening exams and emergency services for any person who presents at the Emergency Department with an emergent medical condition, regardless of the nature of their medical need, their medical history, or former providers. This is consistent with the Emergency Medical Treatment and Labor Act, a federal law that requires us to provide emergency screening, treatment and stabilization. It is also consistent with the governing principles of medical ethics. Therefore, UNMHSC would not turn away a patient from a non-UNMHSC facility who needed medical services due to abortion complications.

Responsive documents are enclosed.

- 10) All documents that include descriptions, policies, or guidelines related to any method of abortion or fetal tissue research, and prenatal or postnatal infant care available to patients.**

Note: Per email correspondence with staff dated January 22, 2016, the panel has agreed that UNMHSC need not provide documents that relate exclusively to prenatal or postnatal infant care except in cases where the abortion of an infant was sought or procured.

UNMHSC Response: Responsive documents are enclosed.

- 11) All documents that include descriptions, policies, or guidelines related to any UNMHSC entities' referral of patients to any other entity, whether internal or external to the university, for the purpose of procuring any method of abortion or prenatal or postnatal infant care, including identification of those entities to which referral is made.**

Note: Per email correspondence with staff dated January 22, 2016, the panel has agreed that UNMHSC need not provide documents that relate exclusively to prenatal or postnatal infant care except in cases where the abortion of an infant was sought or procured.

UNMHSC Response: UNMHSC has no documents responsive to this request. The UNMHSC has not adopted policies and guidelines governing the referral of patients to any other entity, whether internal or external to the university, for the purpose of procuring any method of abortion.

The UNMHSC employs around 1,000 medical providers. However, the UNMHSC would expect its medical providers to make any referrals in a manner that is consonant

**UNMHSC's Second Submission to House Select Panel
Response to Information Request Dated January 6, 2016**

with the AMA Code of Medical Ethics. Opinion 8.132, entitled "Referral of Patients: Disclosure of Limitations," provides:

Physicians should always make referral decisions based on the best interests of their patients, regardless of the financing and delivery mechanisms or contractual agreements between patients, health care practitioners and institutions, and third party payers. When physicians agree to provide treatment, they assume an ethical obligation to treat their patients to the best of their ability.

Further, Opinion 3.04, entitled "Referral of Patients," provides:

A physician may refer a patient for diagnostic or therapeutic services to another physician, limited practitioner, or any other provider of health care services permitted by law to furnish such services, whenever he or she believes that this may benefit the patient. As in the case of referrals to physician-specialists, referrals to limited practitioners should be based on their individual competence and ability to perform the services needed by the patient. A physician should not so refer a patient unless the physician is confident that the services provided on referral will be performed competently and in accordance with accepted scientific standards and legal requirements.

- 12) All accounting records, including, but not limited to, accounting memoranda related to the cost and pricing of all health care services at any UNMHSC entities, including but not limited to any method of abortion and prenatal or postnatal infant care, and fetal tissue research.**

Note: Per email correspondence with staff dated January 22, 2016, the panel has agreed to replace the language of item 12 with the following: Any documents created on or after January 1, 2014, related to the cost and pricing of any method of abortion, prenatal or postnatal care for infants born alive during an abortion procedure, fetal tissue procurement, or fetal tissue research.

UNMHSC Response: Responsive documents are enclosed. These documents contain commercially sensitive information concerning prices reimbursed by insurance companies. If this information is released to the public, it will disclose to those insurance companies the amounts bid by their competitors and impact the future bids for services. It will cost UNMHSC and women significant additional fees if such information is publicly disclosed. For this reason, this data is not disclosable under state public record laws.

- 13) All specific requests made by, or to, any UNMHSC entities for fetal tissue on behalf of any and all firms, corporations, non-profit organizations, educational institutions,**

**UNMHSC's Second Submission to House Select Panel
Response to Information Request Dated January 6, 2016**

or other entities, including but not limited to order lists, billing records, payment records, payment vouchers, and receipts.

UNMHSC Response: UNMHSC does not purchase or sell fetal tissue, nor does it transfer fetal tissue in exchange for any other valuable consideration.

Responsive documents are enclosed.

- 14) All documents relating to the purchase, ownership, or rental by any UNMHSC entities of equipment for the storage, disposal, or research of fetal tissue, the preparation of fetal tissue for research, the modification of fetal tissue into cell lines, or any other actions taken by any UNMHSC entities related to fetal tissue, including but not limited to the date the equipment was purchased, its purchase price, its maintenance costs, and records of the depreciation treatment under the tax code of any such equipment.**

Note: Per email correspondence with staff dated January 22, 2016, the panel has agreed to accept an interrogatory answer along with documents responsive to this request.

UNMHSC Response: All of the equipment responsive to this request costs less than \$5,000. UNMHSC does not track maintenance costs and does not depreciate this equipment under the tax code.

DREAM Lab Equipment List

- *Applied Biosystems 7500 Fast PCR Instrument*
- *VWR -80° C freezer*
- *-20° C freezers (Marvel and Kenmore)*
- *True Refrigerator*
- *VWR Fume hood*
- *Microzone Bio-flow hood*
- *Thermo tissue culture incubator*
- *Heraeus tissue culture incubator*
- *Hermle Labnet centrifuge*
- *Biotechnology Thermal Cycler*
- *2 Olympus microscopes*
- *Stereomaster microscope*
- *Thermo ultrapure water filtration system*

UNMHSC has found no documents responsive to this request.

**UNMHSC's Second Submission to House Select Panel
Response to Information Request Dated January 6, 2016**

- 15) An inventory record of all fetal tissues obtained, sold, or retained by any UNMHSC entities, as well as an inventory of current fetal tissue including, in particular, any records that refer to multiple tissue samples or organs or body parts procured from a single fetus.**

UNMHSC Response: UNMHSC does not purchase or sell fetal tissue, nor does it transfer fetal tissue in exchange for any other valuable consideration.

Responsive documents are enclosed.

- 16) All records related to any fetal tissue or cell lines procured from twin fetuses.**

UNMHSC Response: Responsive documents are enclosed.

- 17) All documents relating to rent or site fees paid by entities to which any UNMHSC entities sold, donated, purchased, or otherwise received fetal tissue.**

UNMHSC Response: Please see UNMHSC's response dated January 29, 2016, which is re-printed here for your reference:

UNMHSC has found no documents responsive to this request.

- 18) All banking records of any UNMHSC entities related to the procurement, sale, donation, or distribution or shipment of fetal tissue.**

UNMHSC Response: Please see UNMHSC's response dated January 29, 2016, which is re-printed here for your reference:

UNMHSC has no banking records responsive to this request. The only documents that UNMHSC has related to this request are FedEx receipts for the shipment of tissue to the researcher collaborating with UNMHSC, as described in item number 2.

Responsive documents are enclosed.

- 19) A list of any known litigation in which any UNMHSC entity is named as a party, including any threatened or anticipated litigation, involving abortion procedures, infant care, fetal tissue research, or related referral services.**

Note: Per email correspondence with staff dated January 22, 2016, the panel has agreed to exclude from this request cases involving infant care exclusively, except in the context of prenatal or postnatal care for infants born alive during an abortion procedure.

UNMHSC Response: UNMHSC has found no documents responsive to this request.

February 16, 2016

CONFIDENTIAL

**UNMHSC's Second Submission to House Select Panel
Response to Information Request Dated January 6, 2016**

Exhibit 6.20

We have worked with Southwest Women's Options since 1995. Our translational research on the developing fetus has directly improved neonatal care and infant outcomes. The following table summarizes some of the projects we have performed over the past 20 years. Collaborations have included investigators from UCSF, University of Alabama-Birmingham, University of Illinois-Chicago, and the University of Alberta. These improvements in infant outcomes would not have occurred without the translational research efforts of the DREAM Lab in collaboration with [REDACTED] and the providers at Southwest Women's Options.

Tissue	Study	Results	How this impacts babies
Brain	Effects of erythropoietin and Darbepoietin on human fetal brain cells ^{3, 4}	Fetal brain cell cultures expanded in dose dependent fashion with both Epo and Darbe (red cell and brain growth factors). Darbe had greater protein equivalent effect; both growth factors caused increased Epo receptor expression and increased anti-apoptotic gene expression, mechanisms important to the neuroprotective effects of Epo and Darbe	Preterm infants are currently being enrolled in NIH-funded Epo studies for neuroprotection. Our randomized trial showed significantly improved cognitive outcomes in former preterm infants treated with Epo and Darbe at 2 years ¹⁰ and at 4 years. Use of these agents as part of the clinical care of preterm infants will result in improved neurodevelopmental outcomes and decreased health care costs .
Retina	Epo expression in the developing human eye ⁹ ; VEGF gene expression in the developing human eye	Epo protein increases in the fetal eye with increasing gestation, and levels are greater than in the circulation. VEGF (a blood vessel growth factor) also increases with increasing gestation, but decreases in the circulation.	Some meta analyses have suggested that Epo can increase retinopathy of prematurity (ROP, abnormal growth of blood vessels in the developing retina) in preterm infants, but our studies showed that Epo is required for normal development. Treatment of ROP includes giving Avastin, a VEGF blocker, in order to decrease abnormal blood vessel growth, leading to improved visual outcomes and decreased healthcare costs
Intestine	Development of intestinal immune function in the human fetus ⁶⁻⁸	The developing intestine has an immune response to infection that is significantly different than infants and adults.	Preterm infants are at great risk for intestinal inflammation, infection, injury and death via a process termed necrotizing enterocolitis (NEC). Better understanding specific developmental mechanisms of fetal intestinal inflammation has led to testing of TGF- β as prevention against NEC. Prevention of NEC in preterm infants will significantly decrease a common cause of morbidity and mortality.

Lung	Endothelial progenitors from human fetal lung have lung repair potential ²	Progenitor cells can be isolated from developing lung and expanded in culture. When evaluated in a neonatal lung injury model, expanded progenitors decreased lung injury	This progenitor cell research is leading to novel therapies in preterm infants, who develop chronic preterm lung disease (bronchopulmonary dysplasia, or BPD) at a significant rate, leading to long term pulmonary and developmental problems.
Heart	PDA risk factors are associated with alterations in ductus gene expression ⁵	Treatment for PDAs(blood vessel connecting the aorta and the pulmonary artery) in preterm infants are sometimes unsuccessful, and surgery is required. We identified specific gene differences that increased the risk of persistent PDAs requiring surgery.	Understanding minor differences in heart vessel genes in preterm infants will allow caregivers to identify infants at risk for a patent ductus, and lead to more focused and specific treatment.

References

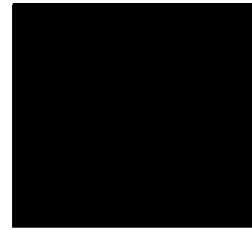
1. [REDACTED] VEGF mRNA and protein concentrations in the developing eye. *Pediatr Res* 2015; doi: 10.1038/pr.2015.15
2. [REDACTED] B. Existence, functional impairment and lung repair potential of endothelial colony forming cells in oxygen-induced arrested alveolar growth. *Circulation* 2014;129:2144-57.
3. [REDACTED] Neuroprotective effects of erythropoiesis-stimulating agents in term and preterm neonates. *Curr Opin Pediatr.* 2014;26:139-45
4. [REDACTED] Why study erythropoietin in preterm infants? *Acta Pediatr* 2013;102:567-8.
5. [REDACTED] Patterns of gene expression in the ductus arteriosus are related to environmental and genetic risk factors for persistent ductus patency. *Pediatr Res* 2010;68:292-7.
6. [REDACTED]
7. [REDACTED] TGF-β2 suppresses macrophage cytokine production and mucosal inflammatory responses in the developing intestine. *Gastroenterol* 2011;140:242-53. [REDACTED] epithelial Cells in Fetal Intestine
8. [REDACTED] Produce Chemerin to Recruit Macrophages. *Am J Physiol Gastrointest Liver Physiol* 2009; 297:G1-10. [REDACTED] Developmental changes in circulating IL-8/CXCL8 isoforms in neonates. *Cytokine* 2009; 46:12-16.
9. [REDACTED] Elevated Erythropoietin mRNA and protein concentrations in the developing human eye. *Pediatr Res* 2008; 63:394-7. NIHMSID 447144
10. [REDACTED] Cognitive outcomes of preterm infants randomized to darbepoetin, erythropoietin or placebo. *Pediatrics* 2014;133:1023-30.

Exhibit 6.21

McDermott Will & Emery

Boston Brussels Chicago Dallas Düsseldorf Frankfurt Houston London Los Angeles Miami
Milan Munich New York Orange County Paris Rome Seoul Silicon Valley Washington, D.C.

Strategic alliance with MWE China Law Offices (Shanghai)



January 29, 2016

BY U.S. MAIL AND EMAIL

The Honorable Marsha Blackburn
Attn: March Bell, Frank Scaturro, Esq.,
House Select Panel on Infant Lives
H2-316 Ford House Office Building
Washington, DC 20515

Re: Information Request to University of New Mexico Health Sciences Center

Dear Chairwoman Blackburn:

By letter dated January 6, 2016, you have requested that the University of New Mexico Health Sciences Center (UNMHSC), to include all of the entities you describe in your letter, provide you with certain information related to the UNMHSC's research activities involving fetal tissue.

Following the receipt of your letter, we spoke with staff of the select panel by telephone on January 13, 2016 and received email correspondence from the staff on January 22, 2016, regarding the requests. Through our communication, we: (1) agreed to produce materials responsive to the requests in a "rolling" process, with our first production on January 29, 2016 and our second on or around February 15, 2016; (2) agreed to certain limits to some of the items in the request letter; (3) agreed to submit interrogatory responses to certain requests herein.

Please find enclosed UNMHSC's first submission in response to your letter, which contains interim interrogatory responses to requests 1, 2, 3, 5, 13, and 17. UNMHSC is continuing to collect and process additional responsive material. We will produce materials responsive to the remaining requests on or around February 15, 2016. We reserve the right to amend these responses when we send the more complete production on February 15, 2016.

The interrogatory responses UNMHSC is submitting today, like the materials it will next submit, contain identifying information that could easily lead to the identity of the individuals referenced therein. The atmosphere surrounding the issue of fetal tissue research has become highly charged, as evidenced by the deadly attack at a Planned Parenthood clinic in Colorado in November 2015, as well as the specific death threat received by another individual that I previously shared with your staff. Accordingly, we respectfully request that Members and staff treat as highly confidential and sensitive both the interrogatory responses provided today and the forthcoming production of materials, all of which will be marked "Confidential" as appropriate.

The Honorable Marsha Blackburn
January 29, 2016
Page 2

Please do not hesitate to contact me or my colleague, [REDACTED] if you have questions.

Sincerely,

[REDACTED]

Enclosure

January 29, 2016

Confidential

**UNMHSC's First Submission to House Select Panel
Response to Information Request Dated January 6, 2016**

- 1) A list of all entities, including firms, corporations, non-profit organizations, and educational institutions, from which any UNMHSC entities receive or procure fetal tissue.**

UNMHSC Response: The only entity from which UNMHSC receives fetal tissue is Southwestern Women's Options in Albuquerque, NM. The tissue is donated at no cost to UNMHSC and it is picked up at the clinic by UNMHSC staff. No money is exchanged.

- 2) A list of all entities, including firms, corporations, non-profit organizations, and educational institutions, along with identification of responsible individuals, to or from which any UNMHSC entities purchase, sell, donate, or otherwise receive fetal tissue.**

UNMHSC Response: The only entity from which UNMHSC receives fetal tissue is Southwestern Women's Options in Albuquerque, NM. The tissue is donated at no cost to UNMHSC and it is picked up at the clinic by UNMHSC staff. No money is exchanged. UNMHSC has shared fetal tissue with three research collaborators outside of UNMHSC. One researcher is currently at the University of South Florida (previously worked at University of Alabama, Birmingham and University of Illinois, Chicago). The second researcher is at the University of Ottawa in Canada (previously worked at University of Edmonton). The third researcher is at the University of California San Francisco. No money is exchanged for the tissue as part of these collaborative research projects.

UNMHSC pays the cost of shipping for tissue sent within the United States to the U.S.-based researchers. The Canada-based researcher provides a Federal Express account number to UNMHSC for its shipments to Canada. UNMHSC staff follows all Federal Express shipment requirements for potentially biohazardous material.

- 3) A list of all entities, including firms, corporations, non-profit organizations, and educational institutions, to which any UNMHSC entities transferred, subcontracted, or sold any business interest or business assets related to the procurement or sale of fetal tissue.**

UNMHSC Response: None.

- 4) An organizational chart that details all personnel and supervisory personnel among UNMHSC entities, along with a description of each of their job responsibilities, for anyone whose responsibilities would include handling, researching, preparing for research, storing, or disposing fetal tissue.**

Note: Per email correspondence with staff dated January 22, 2016, the panel has agreed to accept identification of individuals on the organization chart by position at UNMHSC rather than by name.

**UNMHSC's First Submission to House Select Panel
Response to Information Request Dated January 6, 2016**

UNMHSC Response: UNMHSC will produce materials responsive to this request by February 15, 2016.

- 5) **All communications, correspondence, agreements, emails, telephone messages, and purchase orders, bills of sale, or any other documents reflecting any payments between any of the UNMHSC entities and any entity from which a UNMHSC entity has procured fetal tissue.**

UNMHSC Response: No responsive materials.

- 6) **All communications, correspondence, agreements, emails, telephone messages, and purchase orders or bills of sale between any personnel of the School of Medicine, Health Sciences Center, Center for Reproductive Health, Young Women's Clinic, Division of Family Planning, Department of Obstetrics and Gynecology, Department of Pathology, Department of Family and Community Medicine, Family Medicine Center, Sandoval Regional Medical Center, Maternal and Child Health Service, Division of Neonatology, and the Developmental Research, Education, and Mentoring (DREAM) Laboratory; and any executive or legislative officials or other employees of the government of the United States, the state of New Mexico, or of any other states, including of any municipality within the State of New Mexico or any other states.**

Note: Per email correspondence with staff dated January 22, 2016, the panel has agreed to limit this request to the context of abortion, infants that survive the abortion procedure, and the handling of or any transactions involving fetal tissue.

UNMHSC Response: UNMHSC will produce materials responsive to this request by February 15, 2016.

- 7) **All financial statements, communications, correspondence, agreements, emails, telephone messages, and purchase orders, bills of sale, or any other documents that identify any federal, state, or local government funds received by the School of Medicine, Health Sciences Center, Center for Reproductive Health, Young Women's Clinic, Division of Family Planning, Department of Obstetrics and Gynecology, Department of Pathology, Department of Family and Community Medicine, Family Medicine Center, Sandoval Regional Medical Center, Maternal and Child Health Service, Division of Neonatology, and the Developmental Research, Education, and Mentoring (DREAM) Laboratory.**

Note: Per email correspondence with staff dated January 22, 2016, the panel has agreed to limit this request to the context of abortion, infants that survive the abortion procedure, and the handling of or any transactions involving fetal tissue.

**UNMHSC's First Submission to House Select Panel
Response to Information Request Dated January 6, 2016**

UNMHSC Response: UNMHSC will produce materials responsive to this request by February 15, 2016.

- 8) All communications, protocols, and agreements, whether internal or external, that direct the personnel of any UNMHSC entities with respect to the handling, storage, transport, or disposal of fetal tissue, including but not limited to training materials, guidance documents, memoranda, emails, telephone messages, and purchase orders or bills of sale.**

UNMHSC Response: UNMHSC will produce materials responsive to this request by February 15, 2016.

- 9) All communications, protocols, and agreements that relate to the transfer of patients from one or more UNMHSC entities to another UNMHSC entity for abortion procedures, or between one or more UNMHSC entities and an outside clinic or other entity, including information on the method by which patient consent is obtained for abortion procedures and use of fetal tissue.**

Note: Per email correspondence with staff dated January 22, 2016, the panel has agreed to accept an interrogatory answer along with documents responsive to this request.

UNMHSC Response: UNMHSC will provide its written response and produce materials responsive to this request by February 15, 2016.

- 10) All documents that include descriptions, policies, or guidelines related to any method of abortion or fetal tissue research, and prenatal or postnatal infant care available to patients.**

Note: Per email correspondence with staff dated January 22, 2016, the panel has agreed that UNMHSC need not provide documents that relate exclusively to prenatal or postnatal infant care except in cases where the abortion of an infant was sought or procured.

UNMHSC Response: UNMHSC will produce materials responsive to this request by February 15, 2016.

- 11) All documents that include descriptions, policies, or guidelines related to any UNMHSC entities' referral of patients to any other entity, whether internal or external to the university, for the purpose of procuring any method of abortion or prenatal or postnatal infant care, including identification of those entities to which referral is made.**

Note: Per email correspondence with staff dated January 22, 2016, the panel has agreed that UNMHSC need not provide documents that relate exclusively to prenatal or

**UNMHSC's First Submission to House Select Panel
Response to Information Request Dated January 6, 2016**

postnatal infant care except in cases where the abortion of an infant was sought or procured.

UNMHSC Response: UNMHSC will produce materials responsive to this request by February 15, 2016.

- 12) All accounting records, including, but not limited to, accounting memoranda related to the cost and pricing of all health care services at any UNMHSC entities, including but not limited to any method of abortion and prenatal or postnatal infant care, and fetal tissue research.**

Note: Per email correspondence with staff dated January 22, 2016, the panel has agreed to replace the language of item 12 with the following: Any documents created on or after January 1, 2014, related to the cost and pricing of any method of abortion, prenatal or postnatal care for infants born alive during an abortion procedure, fetal tissue procurement, or fetal tissue research.

UNMHSC Response: UNMHSC will produce materials responsive to this request by February 15, 2016.

- 13) All specific requests made by, or to, any UNMHSC entities for fetal tissue on behalf of any and all firms, corporations, non-profit organizations, educational institutions, or other entities, including but not limited to order lists, billing records, payment records, payment vouchers, and receipts.**

UNMHSC Response: Please see UNMHSC's responses to requests 1 and 2 above.

- 14) All documents relating to the purchase, ownership, or rental by any UNMHSC entities of equipment for the storage, disposal, or research of fetal tissue, the preparation of fetal tissue for research, the modification of fetal tissue into cell lines, or any other actions taken by any UNMHSC entities related to fetal tissue, including but not limited to the date the equipment was purchased, its purchase price, its maintenance costs, and records of the depreciation treatment under the tax code of any such equipment.**

Note: Per email correspondence with staff dated January 22, 2016, the panel has agreed to accept an interrogatory answer along with documents responsive to this request.

UNMHSC Response: UNMHSC will provide its written response and produce materials responsive to this request by February 15, 2016.

- 15) An inventory record of all fetal tissues obtained, sold, or retained by any UNMHSC entities, as well as an inventory of current fetal tissue including, in particular, any**

January 29, 2016
Confidential

**UNMHSC's First Submission to House Select Panel
Response to Information Request Dated January 6, 2016**

records that refer to multiple tissue samples or organs or body parts procured from a single fetus.

UNMHSC Response: UNMHSC will produce materials responsive to this request by February 15, 2016.

16) All records related to any fetal tissue or cell lines procured from twin fetuses.

UNMHSC Response: UNMHSC will produce materials responsive to this request by February 15, 2016.

17) All documents relating to rent or site fees paid by entities to which any UNMHSC entities sold, donated, purchased, or otherwise received fetal tissue.

UNMHSC Response: No responsive materials.

18) All banking records of any UNMHSC entities related to the procurement, sale, donation, or distribution or shipment of fetal tissue.

UNMHSC Response: UNMHSC has no banking records responsive to this request. The only materials that UNMHSC has related to this request are FedEx receipts for the shipment of tissue to the researcher collaborating with UNMHSC, as described in item number 2.

19) A list of any known litigation in which any UNMHSC entity is named as a party, including any threatened or anticipated litigation, involving abortion procedures, infant care, fetal tissue research, or related referral services.

Note: Per email correspondence with staff dated January 22, 2016, the panel has agreed to exclude from this request cases involving infant care exclusively, except in the context of prenatal or postnatal care for infants born alive during an abortion procedure.

UNMHSC Response: UNMHSC will consider producing materials responsive to this request by February 15, 2016, and will either do so or indicate its objections on that date.

Exhibit 6.22

McDermott Will & Emery

Boston Brussels Chicago Dallas Düsseldorf Frankfurt Houston London Los Angeles Miami
Milan Munich New York Orange County Paris Rome Seoul Silicon Valley Washington, D.C.

Strategic alliance with MWE China Law Offices (Shanghai)



March 3, 2016

BY HAND DELIVERY

The Honorable Marsha Blackburn
Attn: March Bell, Frank Scaturro, Esq.,
Heather Sawyer, Esq. for Ranking Member Jan Schakowsky
House Select Panel on Infant Lives
H2-316 Ford House Office Building
Washington, DC 20515

Re: Subpoena Response from University of New Mexico Health Sciences Center
("UNMHSC")

Dear Chairman Blackburn:

Please find enclosed UNMHSC's additional responses to your subpoena dated February 12, 2016 (served by agreement on February 16, 2016).

As we stated in our letter to you dated February 19, 2016, several of the subpoena requests overlap with requests in your letter request dated January 6, 2016. On February 16, 2016, the date this subpoena was served, UNMHSC voluntarily served interrogatory answers and produced over 3000 pages of documents to the Panel, completing its voluntary response to all requests. As we indicated in the February 19, 2016 letter, UNMHSC's February 16, 2016 production contained documents responsive to subpoena requests 3, 6, 7, 8, 9, and 10, half of the twelve requests made in the subpoena.

Enclosed are written responses and/or documents responsive to the subpoena requests. This production is comprised of 13 documents totaling 133 pages, and is Bates numbered UNM03122-3254.

UNMHSC sent a letter to the Select Panel on February 19, 2016 with concerns and questions regarding several aspects of the subpoena, which is incorporated here by reference. (Ltr. from [REDACTED] to Chair Blackburn, Feb. 19, 2016). To date, UNMHSC has received no substantive response from the Select Panel to the issues raised in that letter.

The responses and documents UNMHSC is submitting today contain information that could easily identify the individuals referenced therein. The atmosphere surrounding the issue of fetal tissue research has become highly charged, as evidenced by the deadly attack at a Planned

The Honorable Marsha Blackburn

March 3, 2016

Page 2

Parenthood clinic in Colorado in November 2015, as well as the specific death threat received by another individual (leading to a FBI investigation and an arrest) that I previously shared with your staff. Accordingly, we respectfully request that Members and staff treat as highly confidential and sensitive both the interrogatory responses provided today and the forthcoming production of materials, all of which will be marked "Confidential" as appropriate.

Please contact me, or in my absence my colleague [REDACTED] if you have questions.

Sincerely,

[REDACTED]

cc:

[REDACTED]

Enclosures

**UNMHSC's Response to House Select Panel
Subpoena dated February 12, 2016**

- 1. Documents sufficient to show all entities and/or persons from which UNM purchased or otherwise received fetal tissue. Should UNM wish to produce a list identifying such entities and/or persons in lieu of documents, it may do so.**

UNMHSC provided a response to this request on January 29, 2016 and supplemented its response on February 16, 2016. UNMHSC's February 16, 2016 response is reiterated here for your reference:

The only entity from which UNMHSC receives fetal tissue is Southwestern Women's Options in Albuquerque, NM. The tissue is given to UNMHSC at no cost, and it is picked up at the clinic by a member of the UNMHSC staff, who travels to the clinic for that purpose. UNMHSC does not purchase or sell fetal tissue, nor does it transfer fetal tissue in exchange for any other valuable consideration. To protect the privacy rights of the patient, all fetal tissue the UNMHSC picks up from Southwestern Women's Option is fully de-identified within the meaning of HIPAA and the UNMHSC has no means by which to link information about the tissue back to the mother.

- 2. Documents sufficient to show all entities and/or persons to which UNM transferred fetal tissue. Should UNM wish to produce a list identifying such entities and/or persons in lieu of documents, it may do so.**

UNMHSC provided a response to this request on January 29, 2016 and supplemented this response on February 16, 2016. UNMHSC's February 16, 2016 response is reiterated here for your reference:

UNMHSC does not purchase or sell fetal tissue, nor does it transfer fetal tissue in exchange for any other valuable consideration.

The only entity from which UNMHSC receives fetal tissue is Southwestern Women's Options in Albuquerque, NM. The tissue is given to UNMHSC at no cost, and it is picked up at the clinic by a member of the UNMHSC staff, who travels to the clinic for that purpose. UNMHSC does not purchase or sell fetal tissue, nor does it transfer fetal tissue in exchange for any other valuable consideration. To protect the privacy rights of the patient, all fetal tissue the UNMHSC picks up from Southwestern Women's Option is fully de-identified within the meaning of HIPAA and the UNMHSC has no means by which to link information about the tissue back to the mother.

UNMHSC has shared fetal tissue with three research collaborators outside of UNMHSC. One researcher is currently at the University of South Florida (previously worked at University of Alabama, Birmingham and University of Illinois, Chicago). The second researcher is at the University of Ottawa in Canada (previously worked at University of Edmonton). The third researcher is at the University of California San Francisco. No consideration is exchanged for the tissue as part of these collaborative research projects.

**UNMHSC's Response to House Select Panel
Subpoena dated February 12, 2016**

UNMHSC pays the cost of shipping for tissue sent within the United States to the U.S.-based researchers. The Canada-based researcher provides a Federal Express account number to UNMHSC for its shipments to Canada. UNMHSC staff follows all Federal Express shipment requirements for potentially biohazardous material.

- 3. Documents sufficient to show (a) all UNM studies that used fetal tissue and a description of each study's methods, purposes, and results, and (b) the identity, by name, of persons who participated in each study and the source of funding of the study. Should UNM wish to produce a list or chart reflecting the information requested in (a) and (b) in lieu of documents, it may do so.**

UNMHSC provided documents responsive to this request on February 16, 2016. Additional responsive documents are enclosed. To the extent published articles contain the names of investigators in a study, they are included in this production.

UNMHSC has identified eleven (11) medical students or residents and eight (8) faculty members who participated in fetal tissue research but who may not be named in published articles. UNMHSC has not included those names in this response.

UNMHSC has twice written to you addressing this issue—once by email on January 29, 2016, and once by formal letter on February 19, 2016. In its correspondence, UNMHSC asked the Select Panel to explain how the names of employees and students are pertinent to this investigation. The letter provided legal citations describing the Select Panel's duty to explain why the disclosure of names is pertinent. UNMHSC's correspondence also discussed the danger and risks to health and safety posed to individuals named to the Select Panel in the event that names are made public.

To date, UNMHSC has received no substantive response to the issues raised in its correspondence. UNMHSC desires to work cooperatively with the Select Panel to resolve this issue and, therefore, UNMHSC will respond to this issue once the Select Panel provides a response to the questions it has posed in this regard.

- 4. Documents sufficient to show the identity, by name, of all UNM physicians who participated in abortions, prenatal care, or postnatal care of infants who survived an abortion procedure while at Southwestern Women's Options, or any UNM persons who removed fetal tissue from Southwestern Women's Options.**

UNMHSC has found no documents responsive to the first portion of this request.

With regard to the second portion of this request, which seeks "the identity, by name, of...any UNM persons who removed fetal tissue from Southwestern Women's Options," UNMHSC has employed one lab assistant since January 1, 2010 who picks up fetal tissue from Southwestern Women's Options and travels to

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Subpoena dated February 12, 2016**

the clinic for that purpose. To the extent that this request seeks the lab assistant's name, UNMHSC is not prepared at this time, to include this individual's name in its current response for at least two reasons. First, as indicated in UNMHSC's response to Request No. 3, UNMHSC has not been afforded any explanation from the Select Panel as to why names are pertinent. Second, UNMHSC has received no assurance that names it discloses to the Select Panel will not become public, thereby creating risks to the health and safety of these individuals. UNMHSC desires to work cooperatively with the Select Panel to resolve this issue and, therefore, UNMHSC will respond to this issue once the Select Panel provides a response to the questions it has posed in this regard.

- 5. All communications and documents referring or relating to any compensation or valuable consideration exchanged between UNM and entities from which UNM has received fetal tissue.**

UNMHSC provided a response to this request on January 29, 2016, which is reiterated here for your reference:

UNMHSC has found no documents responsive to this request. The only entity from which UNMHSC receives fetal tissue is Southwestern Women's Options in Albuquerque, NM. The tissue is given to UNMHSC at no cost, and it is picked up at the clinic by a member of the UNMHSC staff, who travels to the clinic for that purpose. UNMHSC does not purchase or sell fetal tissue, nor does it transfer fetal tissue in exchange for any other valuable consideration. To protect the privacy rights of the patient, all fetal tissue the UNMHSC picks up from Southwestern Women's Option is fully de-identified within the meaning of HIPAA and the UNMHSC has no means by which to link information about the tissue back to the mother.

- 6. All communications and documents referring or relating to any federal, state, or local government funds received by UNM that were used, in whole or in part, for any procedures, research, or training involving abortion or fetal tissue.**

UNMHSC provided documents responsive to this request on February 16, 2016. Additional responsive documents are enclosed.

- 7. All communications and documents referring or relating to any contractual relationship between UNM and [REDACTED] including teaching schedules, medical malpractice insurance policies, and all remuneration or other benefits received directly or indirectly by [REDACTED] from UNM.**

[REDACTED] served as an unpaid, volunteer faculty member of UNMHSC. He is one of approximately 1000 volunteer faculty members. This is a requirement of all preceptors at external sites. UNMHSC produced documents responsive to this request on February 16, 2016. Additional documents responsive to the revised request are enclosed. All

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“public employees” as defined in the New Mexico Tort Claims Act, Section 41-4-1 et seq., NMSA 1978, as amended, are afforded immunity from liability and liability coverage for those specified acts or events as to which the New Mexico Tort Claims Act waives immunity up to the limits established by the New Mexico Tort Claims Act. The Director of the Risk Management Division of the New Mexico General Services Department is vested with authority to make coverage determinations as to whether an individual is or is not a “public employee” vis-à-vis the tort alleged in the tort claim notice. UNMHSC does not make coverage determinations.

8. All communications between UNM and any federal, state, or local government officials or employees, referring or relating to abortion or fetal tissue.

UNMHSC produced documents responsive to this request on February 16, 2016.

9. All communications and documents directing personnel of UNM with respect to procurement or disposal of fetal tissue, or the conduct of abortion procedures.

UNMHSC produced documents responsive to this request on February 16, 2016. Additional responsive documents are enclosed.

10. All communications and documents UNM utilizes to obtain patient consent for abortion procedures and donation of fetal tissue. (See instruction below regarding HIPAA.)

UNMHSC produced documents responsive to this request on February 16, 2016. Additional responsive documents are enclosed. Fetal tissue from abortions performed at the UNMHSC is not utilized for any fetal tissue research, either within or outside of the UNMHSC.

11. All communications and documents referring or relating to the purchase, ownership, or rental by UNM of equipment for fetal tissue research, fetal tissue modification, or any other actions taken by UNM related to fetal tissue.

UNMHSC provided a response to this request on February 16, 2016. This response is reiterated here for your reference:

All of the equipment responsive to this request costs less than \$5,000. UNMHSC does not track maintenance costs and does not depreciate this equipment under the tax code.

Equipment List

- *Applied Biosystems 7500 Fast PCR Instrument*
- *VWR -80° C freezer*
- *-20° C freezers (Marvel and Kenmore)*

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- *True Refrigerator*
- *VWR Fume hood*
- *Microzone Bio-flow hood*
- *Thermo tissue culture incubator*
- *Heraeus tissue culture incubator*
- *Hermle Labnet centrifuge*
- *Biotechnology Thermal Cycler*
- *2 Olympus microscopes*
- *Stereomaster microscope*
- *Thermo ultrapure water filtration system*

UNMHSC has found no documents responsive to this request.

12. Documents sufficient to show any litigation to which UNM is, or has been, a party, including any threatened or anticipated litigation, involving abortion procedures, infant care, fetal tissue research, or related referral services. Should UNM wish to produce a list of such litigation, including appropriate docket information in lieu of documents, it may do so.

There is no litigation related to fetal tissue research. There have been no instances of fetuses surviving the abortion procedure at UNMHSC, and therefore, there is no litigation related to this.

There is one litigation matter arising from an abortion procedure at UNMHSC, Caoba v. Bd. of Regents of Univ. of NM ex rel. UNM Hosp., No. D-0101-CV-2013-02331, (NM Dist. C.).

In 2015 alone, UNMHSC treated 792 premature infants in efforts to save their lives and provide them with medical care. UNMHSC has been involved in only one litigation matter involving a premature infant over the past five years: First Nat'l Bank of Santa Fe et al. v. Bd. of Regents of Univ. of NM, No. D-202-CV-2012-06052, (NM Dist. C.).

UNMHSC has been involved in only one litigation matter involving non-premature infant care over the past five years: Greenhaus et al. v. Bd. Of Regents of Univ. of NM, No. D-202-CV-2011-02985, (NM Dist. C.).

Exhibit 6.23

February 12, 2016

VIA HAND DELIVERY

The Honorable Marsha Blackburn, Chair
Select Panel on Infant Lives
H2-316 Ford House Office Building
Washington, DC 20515

Dear Representative Blackburn:

As counsel for Southwestern Women's Options ("Southwestern"), I write in response to your January 6, 2016, letter request, as modified and clarified by conversations with the Select Panel's Majority staff on February 5, 2016. At the outset, I emphasize our appreciation for the Select Panel's continued dialogue with Southwestern regarding these important issues. The responses below and attached documents correspond to each of the Select Panel's requests.

Request No. 1: A list of all entities, including firms, corporations, non-profit organizations, and educational institutions, to which any fetal tissue is transported from Southwestern.

A list of these entities and corresponding descriptions is attached at Appendix A.

Request No. 2: A list of all entities, including firms, corporations, non-profit organizations, and educational institutions, to which Southwestern sells or donates fetal tissue.

Southwestern does not sell fetal tissue or recoup expenses associated with tissue donation, nor has it ever done so. A list of the entities to which Southwestern donates fetal tissue is attached at Appendix B.

Request No. 3: A list of all entities, including firms, corporations, non-profit organizations, and educational institutions, to which Southwestern transferred, subcontracted, or sold any business interest or business assets related to the procurement or sale of fetal tissue.

To the best of Southwestern's knowledge, no such entities exist.

Request No. 4: Identify and provide job descriptions of all Southwestern personnel who conduct or assist with abortions; who handle, research, store or dispose of fetal tissue; or who obtain patient consent relating to fetal tissue.

The medical doctors are the responsible Southwestern employees who provide abortion care, examine each fetal tissue sample, and obtain patient consent. A list of the medical doctors at Southwestern is attached at Appendix C. We are providing this information with their limited consent in an effort to answer the Select Panel's questions, subject to and without waiving any objections relating to these individuals' privacy rights. Also attached at Appendix D is a job description of all Southwestern personnel.

With respect to disclosing the identities of additional Southwestern personnel, Southwestern has significant concerns for the privacy and safety of these individuals—disclosure of these individuals' identities would significantly infringe their privacy rights and potentially subject them to harassment, intimidation, or harm. See *Judicial Watch, Inc. v. FDA*, 449 F.3d 141, 153 (D.C. Cir. 2006) (finding privacy interests warranted withholding personal identifying information in the context of a government approval for a drug used to terminate pregnancy because disclosure risked exposing individuals to "abortion related violence"); *Planned Parenthood Golden Gate v. Superior Court*, 83 Cal. App. 4th 347, 360 (2000) (finding that privacy interests warranted withholding personal identifying information of individuals who worked for or volunteered for Planned Parenthood because disclosure carried "serious risks" including "the infliction of threats, force and violence").

Indeed, last week a federal district court placed restrictions on the release of material that would have publicly identified individuals engaged in conversations about abortion, in part for this very reason. *Nat'l Abortion Fed'n v. Ctr. for Med. Progress*, No. 15 Civ. 3522, 2016 WL 454082, at *1-2 (N.D. Cal. Feb. 5, 2016) (acknowledging a "documented" and "dramatic" increase in the threatened and actual injuries inflicted on individuals and entities involved in providing reproductive health services following disclosure). These concerns are particularly acute here, as Southwestern has been a victim of arson and increasing instances of harassment, intimidation, and threats of physical violence.

While we appreciate the conversations the Select Panel's Majority staff has had with us regarding our safety and privacy concerns, our understanding is that the Select Panel will make no assurances regarding the confidentiality of individuals' identifying information, and the only privacy-based restriction is patient information protected by the American Health Portability and Accountability Act of 1998 ("HIPAA").

Similar to patient information protected by HIPAA, however, Southwestern respectfully submits that the names of its staff do not appear to advance the Panel's efforts to investigate issues related to fetal tissue research—particularly when considered in light of the broader information provided in this response, including the names of the medical doctors responsible for the subject of the Select Panel's investigation. See, e.g., *Judicial Watch*, 449 F.3d at 153 (finding that the privacy right of individuals involved in the development of mifepristone outweighed any asserted interest in disclosure of identifying information, given that "[e]ven if mifepristone has significant health risks, these names and addresses prove nothing about the nature or even the existence of the risks"); *Planned Parenthood Golden Gate*, 83 Cal. App. 4th at 358-59 (holding that disclosure of personal identifying information was not needed to facilitate the identification of potential witnesses, *inter alia*, because Planned Parenthood could through pseudonyms facilitate access if any staff member or volunteer in fact possessed knowledge relevant to litigation); see also *United States v. McSurely*, 473 F.2d 1178, 1203-04 (D.C. Cir. 1972) (requiring subpoenas to seek information "pertinent" to the investigation, and holding subpoena power to have been exceeded where inquiry "diverted" into a personal investigation of subpoenaed individual); *Tobin v. United States*, 306 F.2d 270, 275-76 (D.C. Cir. 1962) (holding invalid a congressional subpoena where the "general terms" authorizing the committee's investigation failed to justify the subpoena's request for detailed information such as internal agency communications).

Accordingly, for the reasons articulated, and notwithstanding our often-stated desire to facilitate the Select Panel's work, as demonstrated in the instant production, we are unable to provide the names of additional Southwestern personnel at this time. Nevertheless, we are committed to being as responsive as possible, and would be open to discussing further the Select Panel's needs and protections for individual privacy and safety.

Request No. 5: All communications, correspondence, agreements, emails, telephone messages, and purchase orders, bills of sale, or any other documents reflecting any payments between Southwestern and the University of New Mexico ("UNM") and any of its affiliated entities or subdivisions, including but not limited to the School of Medicine, Division of Family Planning, Department of Obstetrics and Gynecology, Department of Pathology, Department of Family and Community Medicine, Family Medicine Center, Sandoval Regional Medical Center, Maternal and Child Health Service, Division of Neonatology, and the Developmental Research, Education, and Mentoring (DREAM) Laboratory.

To the best of Southwestern's knowledge, no such documents exist. There are no payments between Southwestern and UNM (including any of its affiliated entities or subdivisions) for any purpose.¹

Request No. 6: All financial statements, communications, correspondences, agreements, emails, telephonic messages, and purchase orders, bills of sale, or any other documents that identify any federal, state, or local funds received by Southwestern.

Southwestern receives funds from the State of New Mexico in the form of reimbursements for services provided to patients enrolled in the State's Medicaid program. See *New Mexico Right to Choose/NARAL v. Johnson*, 975 P.2d 841 (N.M. 1998) (holding that the denial of state funding for abortion services for women enrolled in Medicaid violates the Equal Rights Amendment of the New Mexico Constitution, and directing the use of state funds to pay for abortion services that do not qualify for federal financial assistance under the Hyde Amendment).

Pursuant to our discussion with the Select Panel's Majority staff, attached at SWWO000009-14, SWWO000031-36, SWWO000043-48, and SWWO000055-66, are financial statements indicating the funds received by Southwestern in the form of reimbursement for services provided to Medicaid-enrolled patients from 2010-2015.² Also attached at SWWO000001-2 and SWWO000021-30 are a sample of the reimbursement forms from the State and Medicaid managed care entities that accompany all payments made for services provided to individual Medicaid-enrolled patients, with HIPAA-protected health information redacted. To the extent the Select Panel seeks each and every Medicaid reimbursement form for the past five years, that material would be extremely burdensome and time-consuming to compile, as these records contain thousands of pages and a large amount of individual patient information that would require significant redaction. However, if the Select Panel determines it needs additional documents to further its investigation, I will communicate with the Select Panel's Majority staff to determine how we can resolve any concerns.³

Through 2014, Southwestern also received funds from New Mexico's State Coverage Insurance (SCI) program. Similar to the Medicaid reimbursements, attached at SWWO000003-8, SWWO000015-20, SWWO000037-42, and SWWO000049-54 are financial statements indicating the total funds received by Southwestern in the form of SCI reimbursements for 2010-2014.

_____ serves as a volunteer clinical and adjunct faculty of the UNM School of Medicine but does not receive any remuneration.

² For each Medicaid managed care entity, the total reimbursement received from Southwestern for each time period appears (as a negative number) in the "payments amount" column.

³ We note that Southwestern also received, in 2012, \$7,865.39 in reimbursements from Alameda Alliance for Health, a California MediCal managed care provider. Should the Select Panel wish further documentation to support this figure, such documentation can be provided.

We have attached at Appendix E a spreadsheet of total New Mexico Medicaid and SCI reimbursements received by Southwestern for 2010-2015.

Request No. 7: A list of any medical or nursing students, medical residents, or other medical personnel affiliated with UNM, including but not limited to its subdivisions listed in request 5 above, who participated in the performance of any method of abortion or prenatal or postnatal infant care, including related training exercises.

Southwestern has participated in a program to host medical and nursing students from UNM. But Southwestern does not maintain an inventory or registry of these students, and any such students would not have participated in the performance of any method of abortion or abortion-related training exercises (and Southwestern does not perform any prenatal or postnatal infant care). Medical and nursing students would only have been present to observe and, when appropriate, to participate in the provision of ancillary services they are trained to provide (e.g., taking blood pressure).

As for medical residents or medical fellows affiliated with UNM, we have attached documentation regarding these programs at SWWO000067-70. These medical residents and medical fellows would only have been permitted to participate in the performance of any abortion if they were licensed by the Medical Board of New Mexico and appropriately insured. Like medical and nursing students who may spend time at Southwestern, however, Southwestern does not maintain an inventory or registry of these individuals.

Furthermore, Southwestern maintains the same privacy and security concerns as with its personnel, described in response to Request No. 4. These concerns, particularly regarding safety and privacy, are especially pronounced with respect to medical residents, who may not pursue family planning or OBGYN specialties, and whose public identification does not seem to further any of the six authorized subjects of investigation in H.R. Res. 461, 114th Cong. (2015) (enacted). See *McSurely*, 473 F.2d at 1203-04; *Tobin*, 306 F.2d at 275-76.

Finally, we note that on December 14, 2015, UNM informed Southwestern that it would no longer be sending medical fellows to Southwestern. Documentation of this decision is attached at SWWO000070. It has been publicly reported that the reason for UNM's termination of these programs is that Southwestern does not perform a sufficient volume of abortions to train residents and fellows.

Request No. 8: All communications, correspondence, agreements, emails, telephone messages, and purchase orders or bills of sale relating to fetal tissue between Southwestern and any executive or legislative officials or other employees of the government of the United States, the State of New Mexico, or of any other states, including of any municipality within the State of New Mexico or any other states.

To the best of Southwestern's knowledge, no such communications exist.

Request No. 9: All communications, whether internal or external, that direct Southwestern personnel with respect to the handling, storage, transport, or disposal of fetal tissue, including but not limited to training materials, guidance documents, memoranda, emails, telephone messages, and purchase orders of bills of sale.

Communications responsive to this request are attached at SWWO000071-183.

Request No. 10: All documents that include descriptions, policies, or guidelines related to any method of abortion or fetal tissue research, and prenatal and postnatal infant care available to patients.

Documents responsive to this request are attached at SWWO000184-1010.

Request No. 11: All documents that include descriptions, policies, or guidelines related to Southwestern's referral of patients to any other entity for the purpose of procuring any method of abortion or prenatal or postnatal infant care, including identification of those entities to which referral is made.

To the best of Southwestern's knowledge, there are no documents responsive to this request. Any such referrals would be made on an individual basis.

Request No. 12: All accounting records relating to the cost or pricing of fetal tissue or fetal tissue research, including, but not limited to, accounting memoranda.

To the best of Southwestern's knowledge, no such documents exist. As explained above, Southwestern does not receive any payments relating to the donation of fetal tissue. Nor does it conduct any fetal tissue research itself.

Request No. 13: All specific requests made to Southwestern for fetal tissue made by any and all firms, corporations, non-profit organizations, educational institutions, or other entities, including but not limited to order lists, billing records, payment records, payment vouchers, and receipts.

Southwestern does not receive any payments for fetal tissue. The specific requests to Southwestern for fetal tissue are attached at SWWO001011-1016.

Request No. 14: All documents relating to the purchase, ownership or rental by Southwestern of equipment for the storage, disposal, or research of fetal tissue, the preparation of fetal tissue for research, the modification of fetal tissue into cell lines, or any other actions taken by Southwestern related to fetal tissue including but not limited to the date the equipment was purchased, its purchase price, its maintenance costs, and records of the depreciation treatment under the tax code of any such equipment.

Southwestern purchased one freezer in the relevant time period, to store fetal tissue in anticipation of MedPro's weekly visit to Southwestern to pick up medical waste. Southwestern has been unable to locate the receipt for the purchase of this freezer. The owner's manual and documents relating to this freezer are attached at SWWO001017-1035. There is no other equipment that is used exclusively for fetal tissue, as opposed to other medical services that Southwestern provides.

Request No. 15: An inventory record of all fetal tissues obtained, sold, or retained by Southwestern, as well as an inventory of current fetal tissue including, in particular, any records that refer to multiple tissue samples or organs or body parts procured from a single fetus.

Southwestern does not keep an inventory record of the fetal tissue that it has donated to UNM, nor is there a notation in an individual patient's file when a donation has been made. When Southwestern donates fetal tissue to UNM, it donates all of the fetal tissue obtained from an abortion procedure, it does not create multiple tissue

samples from a single fetus. Southwestern does not retain fetal tissue, with the exception of storing fetal tissue in between weekly medical waste pickups.

Southwestern likewise does not keep an inventory record of the fetal tissue obtained when a patient has made the decision to participate in the International Skeletal Dysplasia Registry and Southwestern facilitates a single transfer of the tissue samples requested.

Request No. 16: All records related to any fetal tissue or cell lines procedure from twin fetuses.

As noted in Request No. 15, Southwestern does not keep an inventory of the fetal tissue that it has donated, including any separate records relating to any fetal tissue from twin fetuses. Southwestern does not perform cell lines procedures from twin fetuses.

Southwestern is aware of one specific instance where fetal tissue was donated from twin fetuses to the International Skeletal Dysplasia Registry, which records were produced in response to Request No. 9 at SWWO000108-128.

Request No. 17: All documents relating to rent or site fees paid by entities to which Southwestern sold or donated fetal tissue.

To the best of Southwestern's knowledge, no such documents exist. Southwestern does not receive rent or site fees from UNM, the only entity with which Southwestern has a fetal tissue donation program—and, as noted, Southwestern does not sell fetal tissue.

Request No. 18: All Southwestern banking records relating to the procurement, sale, donation, or distribution or shipment of fetal tissue.

To the best of Southwestern's knowledge, no such documents exist. Southwestern does not sell fetal tissue or recoup expenses relating to its donation.

Request No. 19: A list of any known litigation in which Southwestern is named as a party, including any threatened or anticipated litigation.

To the best of Southwestern's knowledge, it is not named as a party in any litigation, including threatened or anticipated litigation.

The Honorable Marsha Blackburn, Chair

February 12, 2016

Page 7

Thank you for your time and for your consideration of the information submitted in this response. There are 1,035 pages for the accompany document production. If you have any questions about this information or the enclosed documents, please feel free to contact me.

Sincerely,

A large black rectangular redaction box covering the signature and name of the sender.

cc: Frank Scaturro, Special Counsel, Majority Staff
March Bell, Chief Counsel, Majority Staff
Heather Sawyer, Staff Director and General Counsel, Democratic Staff

Appendix A

1. Pursuant to applicable laws and regulations, Southwestern donates fetal tissue to the University of New Mexico (“UNM”) for academic medical research.
2. Pursuant to applicable laws and regulations, Southwestern provides patients with the option to participate in academic medical research by the International Skeletal Dysplasia Registry in defining the clinical features, cause and possible treatment of skeletal disorders. This study is being conducted by the Orthopedic Surgery Department at the University of California, Los Angeles, in collaboration with Cedars-Sinai Medical Center, Los Angeles.
3. Pursuant to applicable laws and regulations, Southwestern contracts with a licensed medical waste disposal company, MedPro Waste Disposal, to handle all medical waste including fetal tissue. Prior to MedPro Waste Disposal, Southwestern contracted in 2010-2011 with another licensed medical waste disposal company, Stericycle, for the same purposes.
4. Pursuant to applicable laws and regulations, law enforcement authorities may request fetal tissue as evidence—for example, where rape or incest is alleged or where DNA is required for law enforcement purposes. In such cases, those law enforcement authorities arrange for the transport of any fetal tissue; Southwestern does not maintain an inventory or registry of where the tissue is transported.
5. Pursuant to applicable laws and regulations, Southwestern may receive requests from a patient’s diagnostic doctor or specialist to run diagnostic tests on fetal tissue. In such cases, Southwestern arranges for transport of the fetal tissue at the direction of the patient and diagnostic doctor; Southwestern does not maintain an inventory or registry of where the tissue is transported.
6. Pursuant to applicable laws and regulations, Southwestern may receive requests from individual patients to have a burial, cremation, or religious ceremony, and patients may request transport of fetal tissue to a funeral home, religious institution, tribal representative, or other similar entity. In such cases, the receiving entity arranges for transport of the fetal tissue; Southwestern does not maintain an inventory or registry of these receiving entities.

Appendix B

Pursuant to applicable laws and regulations, Southwestern donates fetal tissue to the University of New Mexico (“UNM”) for academic medical research. This is the only entity to which Southwestern donates fetal tissue.¹

¹ Southwestern does not donate fetal tissue to the International Skeletal Dysplasia Registry; any such donation is made directly by an individual patient.

Appendix C¹

[REDACTED]

¹ [REDACTED] retired from medical practice at Southwestern in August 2015.

D

Appendix D

[REDACTED] employs and trains physicians and other medical personnel as necessary and appropriate to patient care and relevant laws and regulations. He develops and/or approves all medical protocols. He also provides ongoing supervision to physicians and is available to them for assistance as needed.

Medical Director of Southwestern. The Medical Director is responsible for overseeing the performance of all physicians, providing policy updates of medical service, ensuring implementation and compliance with clinic policies and procedures (with the Clinic Director), facilitating communication with staff, ensuring physician positions are adequately staffed, coordinating schedules, maintaining external relationships, and working to develop updated policies and procedures. The Medical Director supervises the physicians, the Director of Nursing and nurses, and medical assistants. The Medical Director reports directly to [REDACTED]

Clinic Director. The Clinic Director is responsible for the day-to-day functioning of the clinic, ensuring proper training, facilitating internal and external communications, ensuring implementation and compliance with clinic policies and procedures (with the Medical Director), and working to develop updated policies and procedures. The Clinic Director supervises fourteen counselors/medical assistants. The Clinic Director reports directly to [REDACTED]

Physicians. Physicians are responsible for meeting individually and privately with each patient prior to surgery, reviewing the consent form with the patient and witnessing her signature, reviewing each patient's medical history, lab results, and counseling notes to screen for any contraindications to outpatient surgery, performing a gross tissue examination immediately postoperative and ordering microscopic tissue exams when necessary, reviewing all lab reports and ordering special postoperative instructions when indicated, reviewing all postoperative examinations done by the nursing staff, being on-call after-hours at all times, and immediate availability if there is a patient in the Recovery Room.

Director of Nursing. The Director of Nursing is responsible for overseeing nursing care to ensure high quality, training and supervising nursing staff, working to ensure patients are seen promptly and efficiently, conducting performance evaluations, performing nursing duties to assist in the functioning of the clinic as needed, and working to develop policies and procedures.

Nurses. Nurses are responsible for patient care in surgery, assisting the physician during abortions, sonography, postoperative exams, postoperative Recovery Room care, autoclave/pathology procedures, and lab procedures. As part of the autoclave/pathology procedures, nurses are responsible for preparing tissue for the physician to examine, and for placing any tissue in hazardous waste containers for medical waste pickup.

Counselors/Medical Assistants. Counselors/Medical Assistants are cross-trained to be responsible for providing individual and confidential counseling sessions, ensuring accurate

medical record keeping, taking blood pressure and pulse monitoring, setting up the surgery room, providing relaxation and other similar techniques to assist a patient during medical procedures, assisting with lab duties such as preparing tissue for the physician to examine, as well as washing, wrapping and sterilizing instruments.

Medical Assistants. Medical Assistants are responsible for the same duties as Counselors/Medical Assistants (see above), except that they do not conduct or assist with patient counseling.



E

Appendix E

New Mexico Medicaid and SCI Reimbursements Received by Southwestern, 2010-2015

	2010	2011	2012	2013	2014	2015
Blue Cross Blue Shield SCI	\$27,659.41	\$20,772.15	\$50,434.21	\$32,730.64	\$194,535.54	\$154,263.24
Lovelace Salud	\$110,466.45	\$144,169.09	\$123,378.10	\$66,679.63	\$1,479.63	\$0
Lovelace SCI	\$14,013.27	\$8,923.44	\$6,360.04	\$3,555.15	\$0	\$0
Molina Centennial	\$65,466.87	\$67,046.76	\$63,374.45	\$13,570.93	\$202,144.94	\$204,231.46
Molina SCI	\$3,579.27	\$0	\$2,018.55	\$0	\$1,360.00	\$0
Presbyterian Centennial	\$163,885.36	\$186,307.98	\$163,176.34	\$176,544.71	\$266,621.74	\$339,010.97
Presbyterian SCI	\$11,772.47	\$13,815.77	\$7,451.64	\$17,800.61	\$845.23	\$0
United Healthcare Centennial	\$0	\$0	\$0	\$0	\$43,451.21	\$66,791.23
Medicaid Xerox	\$574,186.26	\$497,283.93	\$547,657.10	\$489,090.51	\$191,942.50	\$116,485.24
Emerigroup Community Care of NM	\$685.61	\$316.70				
Evercare	\$2,339.50					

Exhibit 6.24

KRUPPEL-LIKE FACTOR 4 EXPRESSION IN DEVELOPING HUMAN SKIN

Investigators:

[REDACTED]

[REDACTED]

Protocol:

Our human fetal tissue studies have been evaluated by the Human Research Review Committee at the University of New Mexico and deemed not to constitute human subject research, as no identifiable human subject data are collected. Women undergoing elective termination of pregnancy are consented by Southwest Women's Options clinic, and can elect to have tissue used for research if they so choose. No interaction between women undergoing the procedure and our laboratory personnel occurs.

Human fetal skin samples (15 to 24 weeks gestation) from the posterior trunk and upper and lower extremities will be tested for KLF-4 expression. Baseline samples (minimal exposure to light or ambient oxygen) will be compared to samples incubated for 24 hours at 21% oxygen, simulating conditions following premature birth. Total RNA will be isolated and reverse transcribed for quantitative determination by real time PCR using primers and probes for KLF-4 using GAPDH as an internal control in duplex reactions.

Exhibit 6.25

THE ORIGINAL
MARBLE COVER-80 SHEETS

NAME



5x5 QUAD RULED
ROARING SPRING, PA 16673

Add 0.5 ml Trizol, vortex, shake 20 min. minimum in fume hood; store at -80*.

2008

Liver & Kidney (for tissue culture)

Isolate tissue; wash in PBS in dish.

For kidney, take out 1 ml aliquot collagenase, place kidney into vial, cut it up with scissors, and incubate in 37* water bath 10 min.

Then proceed as for liver.

Liver: cut up tissue, place in 10 ml DMEM-FBS medium in 50 ml centrifuge tube.

Using a 10 ml syringe and 18 gauge needle, draw tissue through needle repeatedly until there's no resistance.

Repeat with 20- and 21-gauge needles.

Culture as usual in DMEM.

Heart

Look for the ductus arteriosus—if found, proceed.

Place into Nalgene cryovials:

- DA
- Ascending aorta
- Descending aorta
- 2 pulmonary arteries together

These go into " [REDACTED] DA box" in -80*C.

Eyes

Bottle-nosed microvial; label "retina"

Rinse in PBS, place in special dish.

Cut off lens, discard lens + iris.

Use 200 ul micropipette to place vitreous and aqueous into vial.

Invert eyeball, remove white, gooey retina (not darker stuff).

Both can go together.

Spin 5 min.

Aqueous to a 0.2 ul vial. Vitreous to a 0.2 ul vial. These go, with serum, into -20*C.

Retina will be pelleted. Add 0.5 ml trizol, vortex, then shake in hood 20 min.+

Goes into -80* C freezer.

Liver

1. Place in bottle-nosed microvial.

Add 1 ml trizol, vortex, and shake in hood for a min. of 20 min.

2. Nalgene to -80* C with kidney.

Kidney

Nalgene, pair up with liver, into -80*C.

Brain

Rinse with 5 ml. PBS in dish.

Place 10 ml. DPBS-1% pen-strep-ampho. (in fridge) into 15 ml centrifuge tube.

Transfer brain tissue to tube.

Shake vigorously by hand and vortex, 1 min.

Shake in 37* C. water bath, speed 6, 30 min.

Centrifuge 1500 rpm, 5 min., no or low brake.

Resuspend pellet in 10 ml DMEM-10% FBS-1% pen-strep-ampho, place in flask in incubator.

Cochlea

Rinse in PBS in dish.

Place cochlea (1 or both) into 1 ml vial of trypsin (1 ml aliquots in -20 door in box).

Cut up hard tissue in the vial with scissors.

Incubate at RT for 5 minutes.

Place 10 ml DPBS w/1% pen-strep-ampho into 15 ml centrifuge tube.

Remove trypsin (with cochlear cells) with plastic transfer pipet to the 15 ml tube, leaving hard cochlear bits behind.

Shake vigorously and vortex for ~ 1 min.

Spin down 1500 rpm, 5 min., no brake.

Resuspend pellet in 10 ml DMEM-10% FBS-1% pen-strep-ampho, and place in flask in incubator.

Cord

Clamp both ends and place in dish with PBS, to rinse the outside.

Unclamp one end, place into 2 ml microvial, and "milk" fetal blood into vial.

Spin on benchtop 5 min.

Remove the lighter serum into 0.2 ul vial and place with aq + vit in -20*C freezer.

Add 0.5-1.0 ml trypsin to pellet, vortex, and shake in fume hood 20 min. minimum.

Place in -80*C.

Marrow

Isolate femur.

Prepare 5 ml syringe + 18 gauge needle.

Place PBS to microvial; label another.

Cut bone on one end. Marrow inside is dark. Clean outside of bone with gauze.

Place entire beveled opening of needle into cut end of bone.

Cut off other end and push PBS through, into tube.

Repeat.

Spin @ 3000 rpm to pellet cells, ~ 5 min.

1-15-10

(2) 26mm - 18 weeks

Skin from upper arm (looks degraded)
Retina → [REDACTED]

1-15-10

(3) 23mm - 17 weeks

SKIN from lower leg

(4) 44mm = 25 weeks Treated with digoxin

Heart mushy; GI discolored + liver skin loose

Eyes discolored red 2 retinas → [REDACTED] for coverslips w/
1. 8 Epo 2. 10 Epo

(5) 30mm = 19.6 weeks (DIG)

2-4-10

(1) 33mm = 20.7 weeks

Digoxin - observations

- Cord blood

- Lung

- heart

- skin

- brain

Lung

skin

} Trizol

} formalin

- heart - entire organ mushy
- Kidneys - discolored dark red; Lack of form
- GI discolored
- Lungs - mushy, + discolored w/ blood

6 coverslips - Brain - DMEM complete

2-4-10

26 mm = 18 weeks

Brain
Kidney
Heart
Lung
Skin
Retina
(1)

Skin - formalin

brain - 6 coverslips, comp DME M

2-5-10

(1)

35 mm = 21.5 weeks - DIG

very very red - tissue
tiny bits of brain tissue everywhere

Skin
retina (1)
brain

trizol

(2)

32 mm = 20.4 weeks - DIG

all tissue looked more normal
lung almost approached normal
appearance

- Lung
- Retina (1)
- Skin
- brain

2-11-10

(1)

29 mm = 19.2 weeks - DIG

~~tissue normal~~
tissue looked normal - like ~~me~~
above 20.4 from 2-5-10

- Skin
- Brain
- Heart
- Lung
- Retina (1)

trizol

(2) 39 mm = 23 weeks - DIG

very red tissue
brain & retina pulled apart easily

- Skin
- Brain
- Lung
- Retina (1)

trizol

②

59 mm = ? 30.5 wks

Intact - did not dissect

2-17-10

(1) 25 mm = 17.8 weeks

Lung, 3.6 g → [REDACTED]

Retina (1) - made 1 flask + 6 coverslips

Brain - made 1 flask + 8 coverslips

~~lung sent to~~ [REDACTED]

2-19-10

(1) 13 mm = 13.4 wks

Brain 0.335 g → cultured

2-24-10

(1) 6 mm = 10.6 weeks

Heart - cultured 1 flask + 3 coverslips

Brain? - 3 coverslips

Retina (1) - 24 coverslips

3-10-10

(1) 22 mm = 16.7 weeks

Retina (2) - 1 flask + 3 coverslips

3-11-10

21 mm = 16.3 weeks

Retina (1) - 1 flask + 3 coverslips

3-18-10

18 mm = 15.2 weeks

Retina (1) - 1 flask + 3 coverslips 440 mg lung → [REDACTED]

3-20-10

18 mm = 15.6 weeks

Retina (2) - 1 flask + 3 coverslips

tissue
rain tissue everywhere

shed more normal
approached normal
appearance

Def
rinal - like [unclear]
2-5-10

shed apart easily

3-24-10

(1) 13 mm = 13.4 weeks

brain → culture 0.31 g → 1 flask, 8 CSS + pellet frozen -80°C

~~cell line (1) = 2 flask~~

4-2-10

(1) 21 mm = 16.3 weeks

brain - cultured → coverslips

brain - in Trizol

Lung - in Trizol

Lung → LN₂ for [REDACTED]

retina (1) - flask + 6 coverslips

(2) 13 mm = 13.4 weeks

retina (2) - flask + 6 coverslips

4-8-10

(1) 19 mm = 15.6 wk.

~~cell~~

• brain 1.83 g in 15 ml tubes, shock w/ 5 ml DPBS

Epo 0
10
100

(2) 15 mm = 14 weeks

LUNG → LN₂ for [REDACTED]

233 mg brain - 25 ml DPBS

Epo 0 - 10 - 100 - [REDACTED] + coverslips

5-13-10

(1) 19 mm = 15.6 weeks

Brain - 690 mg → Epo 0-10-100 expt.

Lung
Kidney } Trizol

Lung → LN₂ for [REDACTED]

(2) 18 mm = 15.2 weeks

Brain 2.02 g → Epo expt

Brain → Trizol

Retina (2)

Heart → culture

let frozen -80°C

5-20-10

(1) 21 mm = 16.3

lung → $2N_2$ for [redacted]

Lung } Trizol
Kidney }

brain → [redacted] Epo-Darbe cultures

heart → cultured

5-21-10

(1) 22 mm = 16.7 w/Ks

4 heart vessels → -80°C

brain → [redacted]

brain }
K } Trizol
L }
Lung }

heart → culture ([redacted] Lab Book 3, p. 67)

brain → Epo exp't Epo ϕ -10-100 for [redacted]

5-26-10

(1) No foot found - estimate 17 weeks

Lung → $2N_2$ for [redacted]

brain - 5 tubes }
2 Retinas } Trizol
Lung }

heart - culture

(2) 10 mm = 12.3 weeks

brain → Trizol

5-27-10

(1) 25 mm = 17.8 w/Ks

Brain → unan
Heart → cultured

Lung 2 tubes →
Brain (5)
Ret (1)

Lung → $2N_2$ → [redacted]

Trizol

Liver (3) + Kidney (2)

2/5 LPS

Epo ϕ
10
100

DPBS

→ $2N_2$ for [redacted]

5-28-10

(1) 4mm = 10 weeks
brain → [redacted] for Epo-Darbe exp²⁴.

(2) 5mm = 10.4 weeks
brain → [redacted] for Epo/Darbe

(3) 17mm = 15 week

lung → l N₂ for [redacted]

Lung
Retinas (2)

6-3-10

(1) 5mm = 10.4 w/KS
brain → [redacted] for Epo/Darbe exp.

(2) 22mm = 16.7 w/KS
brain → [redacted]

lung → l N₂ [redacted]
lung → Carlos -80°C

brain
retina (1)
liver
kidney } + trizol → -80°C

6-4-10

(1) 15mm = 14 weeks

Lung } Trizol
2 Retinas }
Heart → Culture

Lung → [redacted]
Lung → [redacted]
Brain → [redacted]
in ice 12:55

(2) 13 mm = 13.4 weeks

2 Retinas → Trizol

heart → Culture

brain → [redacted] in ice 12:55
lung → [redacted] -80

(3) 10 mm = 12.3 weeks.

heart → culture

Lung

Brain →

██████████

-80°

1:40 pm

██████████

on ice 1:45

6-9-10

(1) 6mm = 10.6 weeks.

heart 33mg

brain →

██████████

Epo/Darbe exp.

6-10-10

(1) 18mm = 15.2 w/k

heart
lung
brain
retina

→

██████████

Epo/Darbe exp

6-11-10

(1) 5mm = 10.4 w/k

heart →

culture

6-16-10

(1) 12mm = 13 w/k

brain
heart
lung
kidney

→

██████████

(2) 5mm = 10.4 w/k

retina
brain →

██████████

fr ██████████

ex/2
Carlos -80°

n ice 10:05
-80

6-17-10

(1) 21 mm = 16.3 w/k

Heart = prepped 2 ways $\frac{1}{2}$ hand triturated $\frac{1}{2}$ c/d digestion
retina \rightarrow culture
lung \rightarrow [redacted]
brain \rightarrow [redacted]
kidney \rightarrow [redacted]

Lung } Trizol
Brain }
Kidney }

(2) 7 mm = ~~14.3 w/k~~ 11 w/k

~~retina~~

(3) 9 mm = 12 wks

retina

heart culture

6-18-10

(1) 10 mm = 12.3 weeks
retina (2) \rightarrow cultured

(2) 22 mm = 16.7 weeks
retina (1) \rightarrow cultured

lung } Trizol
brain }
kidney }

heart in PBS on ice 2:40

Lung \rightarrow RN2 for [redacted]
4 heart vessels

7-2-10

(1) 12 mm = 13 weeks

brain → Trizol

1 eye → [REDACTED]

(2) 20 mm = 16 weeks

2 eyes → [REDACTED]

~~umbilicus~~ → ~~haver~~ (Sug)

Cord blood

lung

Kidney

brain } Trizol

(3) 8 mm = 11.6 weeks

2 eyes → [REDACTED]

lung → Trizol

(4) 9 mm = 12 weeks

2 eyes → [REDACTED]

7-22-10

(1) 7 mm = 11 weeks

2 eyes → [REDACTED]

heart → [REDACTED]

2 kidneys → Trizol

7-23-10

(1) 17 mm = 15 weeks

Could not find anything...

lung → [REDACTED]

lung → [REDACTED]

2/30/10

12.7w

took lung

14w

took lung
brain

took ~~heart~~
eyes

11.5

took lung

heart →

11.0

took lung
heart →

8/4/10

16.7w
12.3w

} took lung reserved eye and heart

8/5

11mm → 12.7w took lung reserved eye & heart

8/6

12.0w took lung

11w reserved heart & eyes

8/10/10

16mm = 14.5w/k

• lung

8/11/10

6 mm → 10.6 w

lung → [redacted] in 40C @ 3:30
brain → [redacted]

8/13/10

11.5 Ret (1) + lung + brain

15 Ret (2) + lung + brain

7 mm → 11 w lung + brain

8/25

2.5 mm → 11.3 w
9 mm → 12 w

} took brains, kidney, adrenal gland, lung

8/26/10

1) 6 mm = 10.6 wks.

9/15/10

13 mm → 13.4 w
20 mm → 16 w

took kidney, brain, adrenal
took lung, brain.

9/17/10

20 mm → 16 w
8 mm → 11.5 w
6 mm → 10.6

took brain, lung
" " "
took " " "

spleen, stomach, kidney
intestine, bladder

9/23/10
24 mm → 17.9 w

11/23/10

12 mm → 13 wk

Heart

Heart

eyes

12/28/10

17wk = 23mm

Brain → [REDACTED]

1/5/11

16mm = 10.6 wks.

Brain → [REDACTED]

1-6-11 (1) 18mm = 15.2 wk.

brain 1.9 grams → [REDACTED]

top

2 eyes → [REDACTED] to grow

Lung/heart & → [REDACTED]

passage / freezing expt.

(2) 19mm = 15.6 weeks

brain, 1.65g → [REDACTED]

Heart/lung → [REDACTED]

1-19-11

(1) 20mm 18 weeks

heart } culture
brain }

• K

• L

• Lung

• Cord blood

• brain

} Trizol + -80°C

K, L, Lung → [REDACTED]

3-28-11

11.5 wt Brain -

4-15-11

15.2 Brain (1) -

2

5/26/11 37mm → 22.2 weeks
36mm → 21.8 weeks

5/27/11 14 wt eyes

16 wt eyes, brain, lungs

12.8 wt Brain

10-11-11 13 wt Brain
12.7 wt Heart, Left Lung

6-9-11

19.6 weeks

(30 mm), heart, a little brain

18.5 weeks (27 mm) - lungs, brain

16 weeks (20 mm) - heart (all)

15 weeks (20 mm) - brain

11.5 wt Brain -

11.5 wt

6-10-17

12.7 wie Braun

19 wk Brain (possibly)

6-16-11

6-16-11
16 week brain, eye

$$6 + 12 + 11$$

4 week exam

5 week, 6 week

12.7 week brain

6-23-11

134 week - eye

15.2 week - nothing

C-24-V

1st week

Nov 3, 1954

Bran
Placental Tissue

3.747 g

P2. a

630-11

17 Brain

Հոգաբարձի տնային տնային

2000

22

1

2929

3/10

6

100

10

51

7-23-10

(1) 21 mm. 16.3 weeks.

brain - [redacted] plated flask + CG's for [redacted] expt (Epo-Darke RNA)

heart - [redacted] → myocyte culture

(2) part was in filter - we could not get out.

09

8-4-11

16.0 wk Sample
Brain → [redacted] oligo isolation
→ [redacted] for [redacted] Epo/Darbe brain exp't.

3.0 wk
(2) Retina - [redacted]

8-12-11

11.5 week sample

8-25-11

(1) 23 mm = 17 week 3.1 g. Brain → Epo/Darbe/SGF exp't

(2) retina - 17 wk - [redacted]

9-8-11

15.4 wk Brain CM

9-15-11

① 15 mm = 14 weeks
Brain → Epo/Darbe cell culture 0.16 g
2 Eyes → [redacted]
brain → [redacted]

② 28 mm = 19 weeks
Brain → 0.8 g → Epo/Darbe cell culture
+ some in Trizol
Brain → [redacted]
2 eyes → [redacted]

9-29-11

10.4 Brain - CM 2 eyes → [redacted]

19 wk Brain, 1 Eyes - tissue not normal - didn't culture

both 10.4 + 19 wk brain cells → Epo-Darbe study

9-30-11

(1) 6 mm = 10.6 weeks
• brain - 0.064 g → Epo/Darbe exp't ([redacted])
• 2 eyes

Epo 11/5/11
10/9 10/11/11
10/9 10/11/11

Epo-Darbe RNA

(2) 23 mm = 17 weeks

Brain = .21g
~~sample~~ Pulling sample in to 201

1 eye → [redacted]

(3) Twins = 1 w/ clubbed feet
other = 20 mm = 16 weeks

Brain A = .33g

Brain B = .18g

10.6 eye (2) [redacted]

17 eye (1) - [redacted]

Twins 10 A (2) [redacted]

10 B (2) [redacted]

11-4-11

(1) 15 mm = 14 weeks
brain → culture

2 eyes → culture

1 isolated 1 retina, [redacted] isolated the other

(2) 4 mm = 10 weeks

2 eyes - [redacted] will try! One entire Retina! + piece of the other

11-11-11

(1) 13 mm = 13.4 weeks

2 eyes → retinal culture 11/23/11
lung → Xi

(2) 20 mm = 16 weeks

lung → Xi

Brain

(3) 9 mm = 12 weeks

18-2? D+E, so not intact

1-4-12

(1) 19 DIG - disassembled

(2) 15 mm = 14 weeks

Lung → [redacted] X

(3) 26+ DIG - intact head → 10% Formalin @ RT

(60mm)

3 - glass beads

in hood

OFC 28.5 cm

• Clinic thought 30 wk; [redacted] thought 32

1-5-12

(1) DIG. Clinic labelled 28 week Head → 1st Formalin bath
OFC 26.5 cm

(2) 15 mm = 14 weeks

1 eye

1-6-12

(1) DIG; clinic sez 30+
OFC = 27.5 cm = 30 weeks

(2) 12 mm FL = 13 wk GA 7 mm FL = 11 weeks GA

1-12-12

(1) 24 mm = 17.4 weeks

- Lung for [redacted] (2.95 g)

- 2 retinas → [redacted] for culture + [redacted] assist

- cord blood for RhD RNA isol. practice

- brain → cell culture ([redacted])

isolated the other

+ pieces of the other

1-18-12

one today: 14 weeks

Lung → [redacted] ~1 g

Heart → in ~~new~~ complete DMEM 4°C ONT for [redacted]

Brain and Spinal Cord → [redacted] for oligo isol.

Brain → [redacted] for 1° brain cell culture

1 eye → 4°C in medium → [redacted] for tomorrow

1 heart → " " → [redacted]

1-20-12

15 mm = 14 weeks

Brain → [redacted] Trying 2 ways to create single cell suspension

1 eye → [redacted] placed @ 40C in complete DMEM @ 12:40

1-25-12

6 mm = 10.6 weeks

brain → culture, [redacted]

1-26-12

24 mm = 17.4 weeks

Lung → [redacted]

heart @ 40C in PBS for [redacted]

1-27-12 (1) 18 mm = 15.2

eyes → 40C in PBS for [redacted]

heart 40C [redacted]

brain → [redacted]

culture

Lung → [redacted]

(2) 24 mm = 17.4

Lung → [redacted]

(3) 9 mm = 10.4 wk.

Lung → [redacted]

10/22

2-15-12

15 mm = 19.6 wk

Lung → [redacted]

1 eye → [redacted]

Brain → [redacted]

Heart → [redacted]

Could not ID pancreas; need anatomy lesson

Person

3-2

22 mm = 14.7 week

2 eyes → 40x

lung → 40x

heart → 40x

pancreas (look like middle part) plate

eye → 40x

lung → 40x

heart → 40x

brain → 40x

3-1-12 20 mm = 14 week

pancreas

3-23-12

21 mm = 14.3

1) → brain

2) lung

3) 2 heart

4) → three eyes used two

2-17-12 (3) 1 mm - 12 week friers

brain + cord → to culture

(2) 6 mm = 10.6 week

brain + cord → to culture

2 lung →

3-17-12 (1) 9 mm = 12 week

MEMO 12:40

Re-cell

found opaque "buds"
no structure
what is it?
information

3-14-12 Pi Day

(1) 7mm = 11 weeks
heart in DMEM - 4°C @ 2-15
~~eye~~
brain → [REDACTED]

(2) 5mm = 10.4 weeks
brain → [REDACTED]

3-22-12

(1) 10mm = 12.3

brain
heart — in DMEM (comp) @ 4°C for [REDACTED] tomorrow
2 eyes

(2) 5mm = 10.4

brain
heart — in comp. DMEM @ 4°C

3-28-12 (1) 13mm = 13.4

brain

lung

4-4-12

1. 7mm = 11 weeks

• heart
• lung
• brain

2. 10mm = 12.3 weeks

• heart
• brain
• lung

3. 4 wks = 10 weeks

4-11-12 (1) 11 wks

(2) 17 wks

4-13-12 (1) 13.8 w

lung → PAs →

lung & PAs →

(2) 12.7 wks

3:50 brain →

(Plum med. 402 out)

lung →

5-3-12: no tissue

5-4-12: no tissue

5-4-12: no tissue

(1) 15 wks = 14 weeks

- pancreas 1/2 → Tissue -80°C

1/2 → 3.9% formaldehyde in box @ R.T.

rest of what GI tract → 50% but formaldehyde fix

lung →

5-24-12: Asiald clinic for digoxin treated tissue 24-28 wks.

- for methylation study + because

brains to dissect w/ summer camp students.

clinic est. 87 and 88 wks. Smaller in summer/placement

(1) Bag sez C.R. 49 wks. 2.5 wks. OFC 23.5 cm

blood ~ 5ml from each on 15mL tube, add PBS 7/15mL

spin + lysate pellet over Ficoll-Paque

lung → 10% formalin acetate

85.3 cm OFC

brain → 10% formalin acetate.

1. check →

6.14.12 Thursday

(1) 23 mm = 17 weeks

= cord trying to get HUVEC?

• brain - [redacted] with culture

Lung → [redacted]
in 4°C @ 2:20

(2) 24 mm = 17.4 weeks DIG [redacted]

(3) 18 mm = 12.7 weeks

Small intestine → Trizol for [redacted]

(4) 5 mm = 10.4 weeks

lung → [redacted]

tiny bit of brain in PBS @ 4°C for [redacted]

she plated it Monday & they grew wonderfully!!

6-15-12

(1) 26 mm = 18 weeks
umbilical cord [redacted] [redacted]

(2) 29 mm = 19.2 weeks
umbilical cord [redacted] [redacted]

6-22-12

(1) 11.5 wk (8 mm ft. length)
brain → [redacted]

small intestine → Trizol for [redacted]

(2) 13 wk.
umbilical cord → [redacted]
brain → [redacted]

(3) 16 wk
brain → [redacted]

lg + sm intestine → Trizol for [redacted]

6.27.12 Wed.

(1) 15.6 weeks

- brain → H.D.

- umbilical cord → 4°C for

Lungs →

delayed in transit
rec'd Friday.

(2)

10.6 weeks

- brain →

(3)

12.3 weeks

Small intestine → Trizol for

6.28.12

(1) 24 wk dig. head not intact

umbilicus → 4°C in PBS for

(2)

7 mm = 11 week

brain →

wonderfully!!

6.29.12

(1)

16.7 wk, 22 mm

• 2 eyes, retinas →

• heart →

• brain →

• pancreas

tail → cell culture

mid → cell culture

head → 10% formalin
- acetate

Lg + sm intestine →

• deoxyribose

to culture

trizol

7.5.12

(1)

12.7 weeks

sm. intestine + stomach → trizol/

(2)

6 mm = 10.6 wks.

Found nothing but 1 leg, 1 hand, head, ribs, kidney

7.6.12

(1)

10.4 wks

Brain →

(2)

No intact foot found; clinic measured @ 17 weeks

- brain →

- eye →

- umbilicus → 4°C for Claire, @ 2:30 pm

isol. retina + plated

Alc1: in Trizol

Lg. int

Sm. int.

Stomach

7/19/12

24 wk

Brain →
2 eyes →
heart →

7-25-12

(1) 19 mm = 15.6 week

brain →

1 eye →

pancreas → 10% form acetate
Lung → 50ml comp DMSO
lg intest. Small int. → formalin ✓

8-3-12

(1) 6 mm = 10.6 week

brain →

spinal cord →

sm intestine → Trizol for

8/8/12

(1) 11 mm = 12.7 weeks

- 1 retina
- 1 kidney
- 1/2 Lung
- 1/2 Lung

stomach + esoph → Trizol/

(2) 4 mm = 10 weeks

stomach → Trizol/

8/22/12

(1) 15 mm = 14 weeks
Lung - too young for

(2) Date on bag 4/17/12 - did not open.

8/24

(1) 21 mm = 16.3 weeks

• Liver → trizol

• intestine → 3.7% formaldehyde for

shipped GI to

9-19-12

(1) 18 mm = 15.2 wks

Loads of brain →

That's it -

(2) 6 mm = 10.6 wks

brain →

entire GI in 10% formalin-ac →

h → Trizol/

9-26-12

(1) 7 mm = 11 wk

Brain -

trizol/

10-11-12

1. 8mm = 11.5 weeks

- brain → Trizol → -80°C
→ [redacted]

2. 11mm = 12.7 weeks

- brain

10/24/12

(1) 9mm = 12 week GA

brain → [redacted]

maybe

(2) 6mm = 10.6 GA

brain → [redacted]

(3) 5mm = 10.4 wk GA

[redacted] = stomach - esophagus } together
- duodenum
~~esophagus~~
+ jejunum }
in 10% formalin acetate

10/31

(1) 13mm = 13.4 weeks

brain → [redacted]

pancreas fixed

small intestine - fixed

(2) 19mm = 15.6

brain → [redacted]

small int → Trizol
large int → Trizol + 10% FA
stomach → Trizol

11/7/12

(1) 9 mm = 12 weeks

(2) 10 mm = 10.6 - 11 wk

brain + heart/lung in 10% FA

for [redacted] in 10% formalin

stomach + esoph
large intestine
small intestine

11.28.12

(1) 24 mm = 17.4 weeks
pancreas → culture
+ CS

lg. intestine in 10% formalin

small intestine in 10% FA

lung in 10% FA

lung in 10% FA

(2) 17 mm = 15 weeks

The band + lung in 10% FA

small intestine in 10% FA

lung in 10% FA

(3) 22 mm = 16.7 weeks

Lung → [redacted]

intestine in 10% FA

stomach in 10% FA

(4) 18 mm = 15.2 weeks

Stomach in 10% FA

intestine in 10% FA

12-6-12

(1) 21 mm = 16.3 wk

DA, asc, aorta, desc aorta LFFFA → 1/2

pancreas + macerated/pipetted thru 1ml, 200, 100, 100, 100 tips
18g + 21g needles, then 0.1% collagenase in 5min 37°C
shaking.

-esoph + together
rum
in

lin acetate

testes - fixed

1 → 10% FA
2 → 10% FA
3 → 10% FA

02/06/13

25 mm 17.8 wk
- Brain → [REDACTED]

lung → [REDACTED]

2-13-13

(1) 26 mm = 18 week

Brain → [REDACTED]

lung → [REDACTED]

intestine → [REDACTED]

RO thought maybe dig?

(2) 12 mm 13 wk

Brain → [REDACTED]

2-22-13

(1) 22 mm = 16.7 weeks

Brain → [REDACTED]

GI - stomach, G + sm int, duodenum
fixed → [REDACTED]

(2) 23 mm = 17 wk

pancreas - cultured

(3) 9 mm = 12 wk

Pancreas 1/2 cultured, 1/2 fixed

2-27-13

(1) 18 mm = 15.2 weeks

brain → [REDACTED]

pancreas → [REDACTED]

GI + stomach → 10% FA fix [REDACTED]

(2) 11 mm = 12.7

brain → [REDACTED]

3-01-13

(1) 7 mm = 11 wk

Brain → [REDACTED]

② 11 mm = 12.7 wks -
Brain → [REDACTED]

GI fixed for [REDACTED]

3-6-13

① 12 mm = 13 wk
Spinal cord → [REDACTED]

② 10 mm = 12.3 wk

Brain → [REDACTED], spinal cord → [REDACTED]

3-13-13

① 6 mm = 10.6 wk
brain → [REDACTED]

② 6 mm = 10.6 wk
brain → [REDACTED]

3-15-13

① 13 mm = 13.4 wk
brain → [REDACTED]

②

3-21-13

(1) 10 mm = 12.3 weeks
brain → [REDACTED]

(2) 15 mm = 10.2 wk
brain → [REDACTED]

list of blood samples
back page

3-28-13

① 11 mm = 14 weeks Matches 15 wk. Maternal Blood [REDACTED]
brain → [REDACTED]

heart → Trizol + in maternal blood box

brain → [REDACTED] to coverslips for INS + GCG (-) control

brain → Trizol + in mat. blood box

Match

3/29/13

① 20 mar = 16 weeks [E]

Cord blood →

Not enough

Brain →

— X

Brain →

→ fired to Thelone

4-3-13 1/2 maternal blood samples

① 11 mar = 12.7 weeks BD

② 9 mar = 12 weeks

brain →

+ some CSF's for neg control

mother's
fetus

4-4-13

5 maternal blood samples

4-5-13

7 blood samples

4-9

4 blood samples

4-10

4 "

4-11

2 "

4-12

3 "

4-17-13

① 5 mar = 10.4 WK [K. J.] match

→ heart?

< 23 tubes blood

② 7 mar = 11 WK [V. Y.] match

→ heart?

→ Brain

③ 5 mar = 10.4 WK [J. J.]

?

④ 5 mar = 10.4 WK [Y. D.]

→ left?

③

6/19/13

① 10 weeks (5mm)

② 7 mm = 11 weeks

6/19/13

① 10 weeks (5mm)

② 7 mm = 11 weeks

} found in line in each

ENTIRE PANCREAS - when needed for HPA 2B expt. 191 mg.

1 piece of lung - as above

② 18 mm = 15.2 weeks

lung - 6 pieces - fixed 10% FA for

① 20 mm = 16 weeks

6/7/13

① 13 mm = 13.4 weeks - Nothing

6/10/13

- 5:00 pm

① 10 mm = 12.3 weeks

= brain + PBS → 40c

② 9 mm = 12 weeks (515)

brain → c/s

1/2 in culture (-) control c/s

Brain - 1/2 in 12

(516)

5/10/13

①

11 mm = 12.7 weeks

④

6/10/13

6/10/13

6/10/13

6/10/13

6/10/13

6/10/13

6/10/13

7-3-12

① 14 week
whole pancreas → HIP expt

int → [redacted]

② 17 week
whole panc. → HIP expt

int → [redacted]

③ 10.4 week TC
blood
kidney + adrenal } ASA
L. trizol

7-18-13

① 10.6 week

Brain → [redacted]

Heart — matches — Blood "M.F."

L. trizol

② 12.3 week

Brain → [redacted]

pancreas, intestine → culture (flask) & cs's

Blood - "B.S."

Intestine → [redacted]

③ 14.5 wk

Intestine → [redacted]

7-18-13

① 14A

brain
maternal serum
kidney in trizol

Intestine → [redacted]

② 14B

maternal serum
kidney

Intestine → [redacted]

③ 12

maternal serum
kidney

Intestine → [redacted]

Lab

9

8-19-13 (D) 24 hrs. 17.4 weeks
Intestine → [redacted] Lab

8-14-13
① 16 wk → Brain
② 14 wk → Brain
③ 10.6 wk → Intestine → [redacted]

Heart → Tit 201 - multiple serum
Intestine → [redacted]

② 10 wk = 12.2 weeks (A.I.)
K → Tit 201
Intestine → [redacted]

7-24-13
① 18 wk = 15.2 weeks (S.A.) + pancreas - reactive
Intestine → [redacted]

~~Intestine serum tube empty~~

③ 10.6 weeks
Intestine → [redacted]

④ 12.7
Intestine serum
Intestine → [redacted]

9-25-13

(1) 12 mm = 13 weeks
Brain in Trizol $\rightarrow -80^{\circ}\text{C}$

(2) 5 mm = 10.4 weeks
Brain in Trizol $\rightarrow -80^{\circ}\text{C}$

9/26 - none

9/27 (1) 7 week - oac

(2) 7 mm = 11.5 weeks

intestine \rightarrow [redacted]

(3) 4 mm = 10 weeks

(4) 5 mm = 10.4 weeks

10-2-13

(1) 15 mm = 14 weeks

intestine \rightarrow [redacted]

pancreas \rightarrow culture + coverslips

(2) 10 mm = 12.3 wk

intestine \rightarrow [redacted]

pancreas \rightarrow culture + coverslips

10-3-13

(1) 16.3 wk

pancreas \rightarrow culture + coverslips

intestine \rightarrow [redacted]

Lung \rightarrow [redacted] (put in Fridge over night)

Brain \rightarrow Trizol (RNA) & T-PER (protein) $\rightarrow -80^{\circ}\text{K}$

(2) 12.3 wk

intestine \rightarrow [redacted]

Lung \rightarrow [redacted]

(put in Fridge over night)

10-09-13

9mm = 11.5 WK
Brain in Tri. 201 + T-PER → -80°
Panc → [REDACTED]

9mm = 12 WK
Brain in Tri. 201 + T-PER → -80°

6mm = 10.6 WK
Brain in Tri. 201 + T-PER → -80°
Panc → [REDACTED]

10-10-13

2mm = 16.3
Panc → [REDACTED]
Brain in Tri. + T-PER → -80°

10-11-13

15mm → 14 WK
Brain in Tri. + T-PER → -80°
Panc → [REDACTED]

11 WK
Brain → Tri. + T-PER → -80°

10.4 WK
Brain → Tri. + T-PER → -80°

11mm = 12.7 WK (A, B) TWINS
Brain → Tri. + T-PER → -80°
Panc A + B → [REDACTED] → HEP

10-16-13

10.4 WK
Brain → T-PER + Tri. 201 → -80°

10.4 WK
Brain → T-PER + Tri. 201 → -80°
→ Ma → Intestine

10-17-13

13mm → 13.4 WK
- Ma → Intestine
- Brain → Tri. + T-PER → -80°
- Panc → [REDACTED]

5mm → 10.4 WK
- Intestine → [REDACTED]
- Brain → Tri. + T-PER → -80°

7mm → 11 WK
- Intestine → [REDACTED]
- Brain → Tri. + T-PER → -80°
- Panc → [REDACTED]

18mm → 15.2 WK
- Intestine → [REDACTED]
- Brain → Tri. → -80°
- Panc → [REDACTED]

n) → -80°

(edge over weight)

10-24-13
- 14mm = 13.8 wk
- Panc → [REDACTED]
- Brain → H: 2 T-PCR → -80°C

10-25-13
- 8mm = 11.5 wk
- Panc → [REDACTED]

10-31-13
- 6mm = 10.6
- Panc → [REDACTED]

11-6-13
- 14mm = 15.6 wk
- Panc (4) → [REDACTED]

11-8-13
- 15mm = 14 wk
- Brain → [REDACTED]
- Panc → [REDACTED]
- 5mm = 10.4 wk
- Brain → [REDACTED]
- 7mm = 11 wk
- Brain → [REDACTED]
- Panc → [REDACTED]

11-13-13
- 12mm = 13 wk
- Panc → [REDACTED]
- Brain → [REDACTED]
- GI → [REDACTED]
- 9mm = 12 wk
- Brain → [REDACTED]
- GI → [REDACTED]

11-14-13
- 20mm = 16 wk
- Panc → [REDACTED]
- Brain → [REDACTED]

11-20-13
- 7mm = 11 wk

- RH - blood 16 wk
SS

11-21-13
- 20 mm → 16 wk
- Brain → RH - S.S → Trizol → -80°C
- Panc → [REDACTED]

11-21-13 cont
- Brain → 15.2 wk
- Brain → [REDACTED]
- Panc → [REDACTED]
- 7mm → [REDACTED]
- Panc → [REDACTED]

11-22-13
- RH - Blood [REDACTED] 10 wk
- RH - Blood [REDACTED] 10 wk
- 6mm → 10.6 wk
- [REDACTED] matched Brain [REDACTED]
- 5mm → 10.4 wk
- [REDACTED] matched Brain [REDACTED]

11-26-13
- 11mm → 12.7 wk [REDACTED]
- Blood [REDACTED]
- matching Brain & Lung (Trizol)

12/13/13
- 12mm = 13 wks @ G.A.
12-08-14
- 15mm = 14 wk
- Panc → Pictures → Fixed
weight = 0.086g
- 6mm = 10.6 wk
- Brain → [REDACTED]

1-9-14
Brain 10.0 wk [REDACTED]
11.0 wk [REDACTED]
1-17-14
NADA

1-29-14
① 12 wk AP Rh⁻ mom
Serum + Serum in TZLS } -80
Brain in Trizol

② 10.4 wk ER Rh⁻ mom
Serum + Serum in TZLS } -80
Brain in TZ

③ Rh⁻ blood sample only (mom) 11.2
in "under 10 wk" box

wt
wk
f
f

+

10wk
10wk

5 wk
eel Brain

4 WK
1 Brain

WK

1/2 Lung (T120)

1/3 wks

wt
res → Fixed
ht = 0.086g
distance

1.0 wk CM
0.0 wk CM

Rh - mom
mm in TZLS } -80
izol

Rh - mom
mm in TZLS } -80
FZ

ple only (mom) 1.2
3 wk box

1-31-14
9mm - 12wk
Brain →

2-6-14
1) 5mm = 10.4 wks
brain → w/Epoo Dube

2-12-14
1) 21mm = 16.3 wks
brain →

2-13-14
1) 17mm = 18.1 wks
brain →
heart lung block → 8)

2-14-14
1) 24mm = 17.4 wks
panc → Fixed 3.7% Formaldehyde
heart lung block → 8)
2) 21mm = 16.3 wks
panc → Fixed 3.7% Formaldehyde

2-19-14
(1) 13 weeks (12mm)
(2) 7mm = 11 weeks
(3) 9mm = 12 weeks

2-25-14
(1) 17 weeks } → Lab
(2) 16.3 weeks }

Term umbilical cord for HUVECs
clean cut 2 ends
insert tube - small - into artery
flush w/ PBS (sterile)
heat in PBS - water bath + heat 0.1% collagenase. Used 3 mL collase
warm DMEM + 10% FBS (neutralizes collagenase) to flush

99

4-24-14

(1) 16 wk heart → [redacted], Pharm. 272-8146

5-16-14

16 wk Brain CM
14.5 wk Brain CM

16 wk Heart (2?) for [redacted]

5-22-14

16 wk Brain [redacted]

5-29-14

10 wk Brain for [redacted]

6/5/14

1) 16.7 wk. Brain → [redacted]
Skin → [redacted] → incubator
Heart → [redacted]

2) 13.4 wk. Heart → [redacted]
Skin → [redacted]

3) 38 mm = 22.5 wk Dig - Trisomy 21 Requested w/ med research
brain & lung placed in -80°C, top shelf
skin

Relat

17.8 Skin

for [redacted]

18 wk Brain for High upper for [redacted]

16 wk Brain for [redacted]

CM

20 wk twins - intact brains to [redacted] camp, 10% FA

8146

6-11-14

(1) 43mm = 24.7 wks

Intact brain obtained & placed in 10% FA for [redacted] Camp

6/12/14

(1) 10 wk X

(2) 16.7 wk heart → [redacted]

skin → [redacted]

brain → [redacted]

7-18-14

(1) 20 mm = 16.0 wks

skin → [redacted]

K-13 expt.

(2) 15 mm = 14.0 wks

skin → [redacted]

K-13 expt.

7-16-14

(1) 20 mm = 16 wks

Skin → [redacted]

Skin Exp.

Heart → [redacted]

Fixed

7-24-14

(1) 7 mm = 11 wks

Skin → [redacted]

Skin exp

(2) 26 mm = 18 wks

Skin → [redacted]

Skin exp.

FA

8-1-14

(1) 5mm = 10.4 weeks
(2) 5mm = 10.4 weeks

7 no panc found

8-6-14

samples from Friday; did not work

8-7-14

(1) 4mm = 10 weeks

skin from back → 1 mL Trizol
+ 10 d pancreas → 0.5 mL Trizol

8/8/14

(1) 19mm = 15.6 wks A

(2) 19mm = 15.6 wks B

(3) 3mm = ?

8/13/14

(1) 15mm = 14 wks

8/14/14

(1) 15mm = 14 wks → skin

(2) 11mm = 12.7 wks

(3) 11mm = 12.7 wks

8/15/14

(1) 25mm ⇒ 17.8 wks

(2) 14mm ⇒ 13.8 wks

8/20/14

(1) 8mm = 11.5 weeks

Pancreas → culture!

12-18-24 hr HIP exp't.

8/22/14

1) 25mm = 17.8 wks (skin)

2) 15mm = 14 wks (skin)

3) 9mm = 12 wks (skin)

8/27/14

1) 15mm = 14 wks (skin)

2) 10mm = 13 wks (skin)

- the Stealth Lab Rat!

8/28/14

(1) 14mm = 13.8 weeks

- maybe a pancreas? 1/4 → Trizol in -80°C
remains in comp DMEM in inc.
- GI - in Trizol → -80°C

orange
box

9-3-14

9mm = 12 weeks } nothing

11-6-14

(1) 12mm = 15 weeks

• mesentery

• adrenal gland

• Sm. intestine

? → Trizol testing for presence of INS

11-19-14

19mm = 15.6 weeks

pancreas → HIP2B 10 day exp't

int → Trizol, ✓ for INS exp.

11-20 nothing

94

11-21-14

(1) 6 mm = 10.6 weeks X

(2) 10 mm = 12.3 weeks

stomach → Tr201

3)

12-2-14

(1) 6 mm = 12.7 wk 6 mm = 10.6

X

(2) 21 mm = 16.3 wk

FROZEN - could not find

12-4-14

(1) 14 mm = 13.8 weeks

Panc - macerated + in culture for HIP2B 10 day expt

ST + INT → Tr201

(2) 11 mm = 12.7 weeks

X

(3) 19 mm = 15.6 weeks - 16
-20

Panc - macerated + in culture for HIP2B 10 day expt

ST + INT → Tr201

12-5-14

(1) 7 mm = 11 wks

Could not find panc

1-8-15

(1) 21 mm = 16.3 weeks

intestine w/ meconium → formalin for

1-15-15

(1) 34-35 wk anomaly

(2) 11 mm = 12.7 weeks

no meconium in intestines

no pancreas evident

1-21-15

(1) 14 mm = 13.8 weeks
no meconium
no stomach/panc

(2) 13 mm = 13.4 weeks
no meconium
Stomach broken - no panc ☹

1-22-15

+ 19 mm = 15.6 weeks
int. in ~ 1 cm piece / Small piece int. w/meconium → 4% FA

2-4-15

20 mm = 16 weeks
Looked more like 14, clinic said 14
GI in ~ 1-2 cm piece, no meconium

2-6

(1) 24 mm = 17.4 weeks - Twins

17.4 A GI w/meconium → 4% FA
17.4 B

(2) 27 mm = 18.5 weeks

Small piece of pancreas

3-11-15

(1) 19 mm = 15.6 weeks

NB: needs FRESH meconium.

(2) 22 mm = 16.7 weeks

meconium shipped to

P 6
6-3-15

in the lab

- (1) 14 mm = 13.8 wks collected immediately (3:40)
BL skin upper arm in Trizol in 25 min
- both upper arms, skin placed in 2.5% anti microbials to wash

- (2) 5 mm = 10.4 weeks (3:00)
skin from back + front BL 1.5 hrs

- (3) 10 mm = 12.3 weeks (11:30)
Skin - arm BL 4:45

Skin protocol

note time of collection (clinic)
isolate skin
wash in anti-microbial solution
BL sample =
Macerate \rightarrow Trizole
Shake 20 min
note time
other 2 samples
1 \rightarrow incubate 24 hr
2 \rightarrow incubate 48 hr.

6-10-15

- (1) 14 mm = 13.8 weeks [BROKEN FOOT: CLINIC VERIFIED 16 weeks]
skin from upper + forearm

2:54-3:40 in Trizol + T.Per (BL)

- (2) 10 mm = 12.3 wk 3:45
skin from back/shoulder in trizol 5:00
+ T.Per 75 min

- (3) 15.2 week (18 mm) 3:45
skin from leg + scapula in Trizol 5:00
75 min

6-12-15

- (1) 6 mm = 10.6 week 4:15 ish
- back in trizol 4:30
15 min

- (2) 28 mm = 19.2 weeks 3:10
- skin from arm (forearm) in trizol 4:45
45 min

The lab

to wash

Skin protocol

note time of collection
(clinic)
isolate skin
wash in anti-microbial
solution
BL sample =
Macerate → Trizole
Shake 20 min
note time
then 2 samples
1 → incubate 24 hr
2 → incubate 48 hr.
etc

6-18-15

(1) 6 mm = 10.6 week (11.22)
skin from L & R arm intrizol 12:10
50 min

6-19-15

(1) 2:05 pm 18 mm = 15.2 weeks BL in Trizol 2:30
skin from fore arm + TPer
25 min

(2) 1:35 pm 14 mm = 13.8 weeks BL in Trizol 2:45
70 min

6-26-15

(1) ~~4:00 pm~~ 3:50 15 mm = 14 weeks 14a
BL in TZ @ 4:25 = 35 minutes
skin from arm + foot

(2) 4:05 15 mm = 14 weeks 14b
BL in TZ 4:40 = 35 minutes
hand/calf

7/1/15

10 mm = 12.3 weeks 2.502
BL in TZ @ 3:15
leg/calf

7/2/15

@ 12:15
15 mm = 14 week
- Forearm & leg intrizol @ 1:45

7/3/15

@ 2:13
12 mm = 13 week
leg & arm intrizol @ 3:05

as of 6-19-15
triburate incubated
Samples.
↓ ↓ ↓ ↓

7-17-15

① 18 mm = 15.2 week in Tricol @ 3:30

- per leg & forearms

② - 30 mm = 19.6 weeks

forearm

BL in Tricol + TPer 5:05

*NB - clinic now uses
digoxin only on 20wk

9-10-15

24 mm = 17.4 wks.

Sm. intestine project
Day 1

9-11-15

(1) 20 mm = 16 weeks

(2) 12 mm = 13 weeks

divided into 3 parts:

1) duodenum =



no stomach, but definitely a wider me
inserted & stretched over scissors blade

2) G. around appendix

stretched over forceps

3) general intestine; No meconium present, took from smaller
diameter end + 4 cm
stretched over forceps

10-2-15

(1) 26 mm = 18 wks

10-21-15

(1) 9 mm = 12 wks

9 cm long segment - know it's small intestine because it was attached
to the stomach. Divided into 4 pieces

(2) 19 mm = 15.6 wks

14.5 cm long small intestine segment

10-23-15

(1) 12 mm = 13 weeks

(A) several pieces of small intestine collected. Total ~ 130m

(B) heart also collected & in tact

chick now lives
in only on 20 weeks

10-28-15

14 mm = 13.8 weeks

GI sent to [redacted] in RPMI

11-3-15

8 mm = 11.5 wks

GI sent to [redacted] in RPMI

11-17-15

19 mm = 15.6 weeks

now looking for pancreas

intestine project

GI and bone marrow → [redacted]

11-18-15

21 mm = 16.3 weeks

GI, marrow, spleen → [redacted]
RPMI

pancreas → [redacted]

11-20-15

31 mm → 20 weeks

GI, marrow, spleen → [redacted]
complete RPMI

likely a wider ma-
nu scissors blade

pancreas → [redacted]

mid section parts in 10% F.A
+ shipped to [redacted]

11-24-15

19 mm → 15.6 weeks

GI, marrow, spleen shipped to
[redacted] @ in RPMI

to from smaller

whole pancreas → Trizol for standard

placenta in OCT → Vernal (-80°C)
NON-smoker

11/28/15

(1) 13 week (as reported by SWW - no foot form) non-smoker

31 mm → 12.7 wks

(feet found by [redacted])

whole pancreas → Trizol for standard

placenta in OCT → -80°C

it was attached

P100

12/9/15

10mm = 12.3 wks
(smoker)

pancreas → [redacted]

GI, spleen, marrow sent
to [redacted] in RPMI

placenta → OCT @ -80°C [redacted]

12/11/15

(1) 17mm = 15 wks
(non-smoker)

didn't use - congenital problem

(2) 16mm = 14 weeks, non smoker

placenta in OCT → -80°C [redacted]

[redacted] cannot pick
up in this SAT

12.16.15

(1) only 11mm = 12.7 weeks (+) (smoker)

panc → complete DMEM @ 4°C for [redacted]

lung → [redacted] (complete DMEM)

GI → [redacted] (complete RPMI)

placenta → OCT @ -80°C for [redacted]

12-17-15

(1) 9mm = 12 weeks (-) (non-smoker)

could not find lung or pancreas

GI → [redacted] in plain RPMI
placenta in OCT @ -80°C

(2) 21mm = 16.3 weeks (-) non-sm

placenta in OCT @ -80 - [redacted]

Lung → [redacted]

GI → [redacted]

stomach/GI @ 4°C for [redacted]



Lung for 
ship in ^{complete} DMEM

THE UNIVERSITY OF NEW MEXICO • HEALTH SERVICES CENTER
SCHOOL OF MEDICINE

12-16-15 12.7 week
12-17 16.3

2016



GI
Sent to 

THE UNIVERSITY OF NEW MEXICO • HEALTH SERVICES CENTER
SCHOOL OF MEDICINE

✓ 10.28.15 GI 13.8 wk

✓ 11.3.15 GI 11.5

✓ 11.17.15 15.6 GI ^{bone marrow}

✓ 11.18.15 16.3 GI ^{marrow} ^{spleen}

✓ 11.20.15 20 GI, ^{spleen} ^{marrow}

AM: tissue not viable

✓ 12-9-15 12.3 wk GI + ^{spleen} ^{marrow}

✓ 12-16 12.7 GI

✓ 12-17 12 + 16.3 GI

✓ 11.24 15.6 GI ^{marrow} ^{spleen}

2016



Placenta for
in OCT

THE UNIVERSITY OF NEW MEXICO • HEALTH SERVICES CENTER
SCHOOL OF MEDICINE

11-24-15 15.6, non-smoker (-)
12-25-15 12.7 wk, non-sm (-)
12-9 12.3 wk, smoker (+)
12-11 14 ^{week} non-smoker
12-16 12.7 wk, smoker
12-17 12 (-) 16.3 (-)

2016

Exhibit 6.26

[REDACTED]
[REDACTED]
Albuquerque, New Mexico 87102



May 05, 2015

[REDACTED]
UNMH

Dear Dr. [REDACTED]

This letter reconfirms my ongoing assistance and support for your research involving human fetal tissue.

I have reviewed and been kept updated on your research and feel that the use of fetal tissue continues to be appropriate for your studies. Therefore, I will continue to facilitate your collection of samples from my clinic, following the usual inspection of the tissue.

The termination procedures provided by my clinic at less than 20 weeks gestation use aspiration and dilation and evacuation. Abortions for gestations greater than 20 weeks involve feticide via intrafetal injection of Digoxin. Gestational age is determined by dating, ultrasonic examination and fetal foot length following the completion of the procedure. Samples deemed appropriate for your studies will be available immediately following completion of the procedure and examination of the tissue.

Patients undergoing this procedure sign a consent form which stipulates that the tissue may be used for medical research. I understand that you require no identifying information for the tissue. Please let me know if I can be of any further assistance.

Sincerely,

[REDACTED] ALBUQUERQUE, NEW MEXICO 87102 [REDACTED]

Exhibit 6.27

We have worked with Southwest Women's Options since 1995. Our translational research on the developing fetus has directly improved neonatal care and infant outcomes. The following table summarizes some of the projects we have performed over the past 20 years. Collaborations have included investigators from UCSF, University of Alabama-Birmingham, University of Illinois-Chicago, and the University of Alberta. These improvements in infant outcomes would not have occurred without the translational research efforts of the DREAM Lab in collaboration with Dr. [REDACTED] and the providers at Southwest Women's Options.

Tissue	Study	Results	How this impacts babies
Brain	Effects of erythropoietin and Darbepoietin on human fetal brain cells ^{3,4}	Fetal brain cell cultures expanded in dose dependent fashion with both Epo and Darbe (red cell and brain growth factors). Darbe had greater protein equivalent effect; both growth factors caused increased Epo receptor expression and increased anti-apoptotic gene expression, mechanisms important to the neuroprotective effects of Epo and Darbe	Preterm infants are currently being enrolled in NIH-funded Epo studies for neuroprotection. Our randomized trial showed significantly improved cognitive outcomes in former preterm infants treated with Epo and Darbe at 2 years ¹⁰ and at 4 years. Use of these agents as part of the clinical care of preterm infants will result in improved neurodevelopmental outcomes and decreased health care costs .
Retina	Epo expression in the developing human eye ⁹ ; VEGF gene expression in the developing human eye	Epo protein increases in the fetal eye with increasing gestation, and levels are greater than in the circulation. VEGF (a blood vessel growth factor) also increases with increasing gestation, but decreases in the circulation.	Some meta analyses have suggested that Epo can increase retinopathy of prematurity (ROP, abnormal growth of blood vessels in the developing retina) in preterm infants, but our studies showed that Epo is required for normal development. Treatment of ROP includes giving Avastin, a VEGF blocker, in order to decrease abnormal blood vessel growth, leading to improved visual outcomes and decreased healthcare costs
Intestine	Development of intestinal immune function in the human fetus ⁶⁻⁸	The developing intestine has an immune response to infection that is significantly different than infants and adults.	Preterm infants are at great risk for intestinal inflammation, infection, injury and death via a process termed necrotizing enterocolitis (NEC). Better understanding specific developmental mechanisms of fetal intestinal inflammation has led to testing of TGF- β as prevention against NEC. Prevention of NEC in preterm infants will significantly decrease a common cause of morbidity and mortality, and

			lead to lower mortality, improved outcomes and decreased health care costs.
Lung	Endothelial progenitors from human fetal lung have lung repair potential ²	Progenitor cells can be isolated from developing lung and expanded in culture. When evaluated in a neonatal lung injury model, expanded progenitors decreased lung injury	This progenitor cell research is leading to novel therapies in preterm infants, who develop chronic preterm lung disease (bronchopulmonary dysplasia, or BPD) at a significant rate, leading to long term pulmonary and developmental problems. Improvements in BPD will lead to improved breathing outcomes and decreased health care costs.
Heart	PDA risk factors are associated with alterations in ductus gene expression ⁵	Treatment for PDAs(blood vessel connecting the aorta and the pulmonary artery) in preterm infants are sometimes unsuccessful, and surgery is required. We identified specific gene differences that increased the risk of persistent PDAs requiring surgery.	Understanding minor differences in heart vessel genes in preterm infants will allow caregivers to identify infants at risk for a patent ductus, and lead to more focused and specific treatment. This will lead to improved outcomes and decreased health care costs.

References

1. [REDACTED] VEGF mRNA and protein concentrations in the developing eye. *Pediatr Res* 2015; doi: 10.1038/pr.2015.15
2. [REDACTED] Existence, functional impairment and lung repair potential of endothelial colony forming cells in oxygen-induced arrested alveolar growth. *Circulation* 2014;129:2144-57.
3. [REDACTED] Neuroprotective effects of erythropoiesis-stimulating agents in term and preterm neonates. [REDACTED] *Pediatr*. 2014;26:139-45
4. [REDACTED] Why study erythropoietin in preterm infants? [REDACTED] 2013;102:567-8.
5. [REDACTED] Patterns of gene expression in the ductus arteriosus are related to environmental and genetic risk factors for persistent ductus patency. *Pediatr Res* 2010;68:292-7.
6. [REDACTED]
7. [REDACTED] TGF-β2 suppresses macrophage cytokine production and mucosal inflammatory responses in the developing intestine. *Gastroenterol* 2011;140:242-53. [REDACTED] Epithelial Cells in Fetal Intestine Produce Chemerin to Recruit Macrophages. *Am J Physiol Gastrointest Liver Physiol* 2009; 297:G1-10.
8. [REDACTED] Developmental changes in circulating IL-8/CXCL8 isoforms in neonates. *Cytokine* 2009; 46:12-16.

9. [REDACTED] Elevated Erythropoietin mRNA and protein concentrations in the developing human eye. *Pediatr Res* 2008; 63:394-7. NIHMSID 447144
10. [REDACTED] Cognitive outcomes of preterm infants randomized to darbepoetin, erythropoietin or placebo. *Pediatrics* 2014;133:1023-30.

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Exhibit 6.28

Office of [REDACTED]

July 22, 2015

Dear New Mexico Legislators:

Thank you for your letter dated July 21, 2015, regarding the practices and funding at the University of New Mexico Center for Reproductive Health, as well as associated research issues.

The UNM Health Sciences Center is committed to transparency with the community and strives to provide high-quality, compassionate care to all patients, while educating the next generation of well-trained clinicians for our state.

At the UNM Health Sciences Center, we are committed to complying with all applicable laws, rules and regulations relative to patient care and research involving human subjects and have developed a comprehensive Code of Ethical Conduct and compliance programs. We are also committed to our mission of advancing research that has the potential to save and improve the lives of New Mexicans, as well as people across the country and world.

I appreciate your interest in our mission and in the well-being of New Mexicans, and address each of your questions below.

1. On the UNM OB-GYN Department website, there is a reference made to "high level research and clinical skills in contraception and abortion." What type of abortion-related research is being conducted at UNM and what is the funding source for this research?

We have reviewed our Office of Research database for current studies being conducted that involve either contraception or pregnancy termination. We found no studies involving pregnancy termination. Oversight for research is provided in the form of Institutional Review Boards, which ensure that all federal regulations and laws are followed regarding research studies. Please be aware that the federal regulations are premised upon and follow what is known as the *Belmont Report*, which set forth strong ethical guidelines for all research involving human subjects around respect for persons, beneficence and justice. We maintain a higher ethical and compliance standard for our research than is required by the federal government through our accreditation with the American Association of Human Research Participation.

2. Is the UNM Center for Reproductive Health participating in the sale or trafficking of aborted body parts or performing partial-birth abortion procedures as suggested in the Planned Parenthood investigation? Does the UNM Center for Reproductive Health Center participate in any legal programs that provide fetal body parts to any organization?

No. The Center for Reproductive Health does not participate in any research or commercial venture related to embryonic or fetal tissue. The Center for Reproductive Health does not participate in any programs under which tissue is provided to any internal or external source, other than directly to patients when requested by those patients.

3. *What relationship does UNM have with Planned Parenthood in New Mexico? What is the nature of the relationship between UNM and late-term abortion doctor Dr. Curtis Boyd?*

The UNM Health Sciences Center has contracts in place in the form of Professional Service Agreements under which School of Medicine faculty provide medical services at Planned Parenthood. Additionally, medical students, residents and fellows have the option of performing rotations at Planned Parenthood under the supervision of our faculty. All learners, including students, residents and fellows, may opt out of pregnancy termination-related services. This is consistent with current Accreditation Council for Graduate and Medical Education (ACGME) program requirements, IV. A. 2. D, which state: "No program or resident with a religious or moral objection shall be required to provide training in or perform induced abortions. Otherwise, access to experience with induced abortion must be a part of residency education." The ACGME guidance on this issue states: "Access to experience with induced abortion must be a part of residency education. Programs with restrictions on the provision of family planning services or abortions must make arrangements for such resident training to occur at another institution."

Regarding Southwest Women's Options, Family Planning fellows have a four-week rotation at that site. This rotation is provided without remuneration by either party. Fellows may opt out of this rotation.

4. *What are the specific funding sources for UNM's Reproductive Health Clinic? Specifically, the abortion procedures it performs.*

The Center for Reproductive Health is a self-sustaining clinic largely funded by private insurance and Medicaid (about 15 percent of its patients are private payers). The faculty members who practice at the Center for Reproductive Health are not funded by any state funds outside of Medicaid.

5. *Is UNM providing emergency services for Dr. Boyd when abortion related complications arise from his late term abortion practice in Albuquerque? If so, how many emergency transports from Southwestern Women's Options has UNM provided for patients with abortion-related complications?*

The UNM Health Sciences Center, including UNM Hospital, does not have any contract or arrangement with Southwest Women Options to provide any medical services to them or their patients, other than the Family Planning Fellowship rotation. UNM Hospital provides medical screening exams and emergency services for any person who presents at the Emergency Department with an emergent medical condition, regardless of the nature of their medical need, their medical history or former providers. This is consistent with the Emergency Medical Treatment and Labor Act, a federal law that requires us to provide emergency screening, treatment and stabilization. It is also consistent with the governing principles of medical ethics. Neither UNM Hospital nor UNM provide any transport services to patients experiencing emergency events or other medical complications outside of our facilities. Patients who come to our Emergency Department from an outside facility are either transported via ambulance (i.e., fire departments, Albuquerque Ambulance or other licensed ambulance providers) or via private means (e.g., private vehicle or on foot).

6. *The Southwestern Women's Options consent form explicitly states that aborted body parts are being harvested in Albuquerque and used for research. Does UNM receive these body parts and, if so, what is the UNM Center for Reproductive Health doing to ensure that existing federal laws are not violated?*

We have one research study aimed at improving life expectancy and outcomes in extremely premature infants being conducted by a neonatologist in the Department of Pediatrics whose protocol uses fetal tissue from the Southwest Women's Options clinic. Ours is one of 19 institutions working on research protocols to extend and improve the quality of life of extremely premature babies.

As you note above in your question, the women receiving pregnancy terminations from this clinic explicitly consent to the use of the fetal tissue in research. The fetal tissue is not paid for and is transported by UNM lab assistants under strict research protocols. Our neonatologist has no contact with any of the physicians performing the pregnancy terminations, or with any of the patients.

The Center for Reproductive Health has no involvement in this research and would not be the appropriate oversight body for any research conducted at the UNM Health Sciences Center. This research protocol has received approval from the Health Sciences Center's Institutional Review Board, the entity tasked by federal law with ensuring that researchers adhere to applicable standards, regulations and laws. In addition, I serve as the institutional official for the Health Sciences Center's human research protections program and therefore oversee the institution's compliance with applicable laws, rules and regulations as they relate to our research involving human subjects.

The specific research being conducted by our neonatology division involves both fetal tissue and clinical studies on premature infants. This research includes:

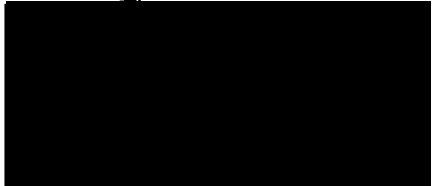
- A study on the effects of erythropoietin (a hormone that controls red blood cell production and growth) and darbepoetin (a chemical synthetic form of the hormone), which aid in brain cell growth. This study found that darbepoetin aided more in brain growth and development due to its protein effect, and that both chemicals protected the brain. These studies led to an NIH-funded clinical study on preterm infants using both chemicals. This clinical study found that preterm infants treated with both chemicals, as opposed to just one, showed significantly improved cognitive function at two years and four years of age and needed less developmental intervention.
- A study on erythropoietin and vascular endothelial growth factor, which helps to grow blood vessels. The original theory was that erythropoietin led to increased retinopathy (damage to the blood vessels in the eyes), leading to vision loss. This study found that erythropoietin actually does not increase retinopathy in premature infants, but VEGF may. It found that a more effective treatment for retinopathy involved blocking VEGF, leading to improved sight in children born prematurely.
- A study finding that increased inflammatory response puts preterm babies at greater risk for intestinal inflammation, infection and death due to a condition that causes part of their

intestines to die. This study led to a better understanding of developmental mechanisms and the testing of a new drug that prevents necrotizing enterocolitis and will lead to significant decreases in preterm infant morbidity and mortality.

- A study that led to the discovery that originating lung cells can play a role in lung repair, leading to new therapies in preterm infants to treat chronic preterm lung disease.
- A study focused on understanding minor difference in heart vessel genes that can allow health care providers to identify infants at risk for heart defects requiring surgery, leading to earlier, more focused treatment and improved outcomes.

I hope this information satisfactorily answers your questions. Please feel free to contact me if you have further questions or need more information.

Sincerely,

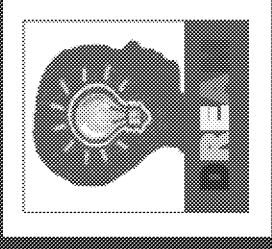


UNM Health System
UNM School of Medicine

Exhibit 6.29

DREAM* Lab Update on Fetal and Neonatal Studies

(*Developmental Research, Education and Mentoring)



Common problems in preterm infants

Infants born prematurely suffer from numerous problems affecting every organ system

Premature adaptation from the *in utero* environment to the extra uterine environment creates significant developmental stressors which are managed differently by each system:

- Lung
- Brain
- Skin
- Gut
- Eye



Research Projects Performed with the [REDACTED] Clinic 1995-2005

1. Erythropoietin (Epo) gene expression in fetal kidney/liver
2. Hypoxic induction of HIF and Epo gene expression
3. Epo receptor expression in the fetal circulation
4. Response of fetal liver and marrow to erythropoietin (Epo) and darbepoetin (Darbe)
5. Matrix metalloproteinase concentrations in developing eye
6. Regulation of Epo gene expression through methylation
7. Endothelial and mesenchymal progenitors in fetal liver/marrow

Research Projects Performed with the [REDACTED] Clinic 2006-2011

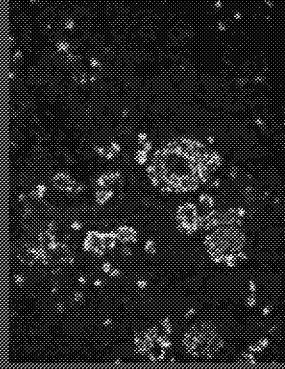
- 1. Gene expression in the developing ductus arteriosus**
- 2. Epo and VEGF expression in the developing eye**
- 3. Inflammatory cells in the developing intestine**
- 4. KLF-4 gene expression in developing skin**
- 5. Endoglin and Flt expression in developing fetus**
- 6. Endogenous gene expression in developing organs**
- 7. Effects of ESAs on cardiomyocyte development**
- 8. Methylation patterns in developing brain**

Current Research Projects Performed with the [REDACTED] Clinic 2012-2013

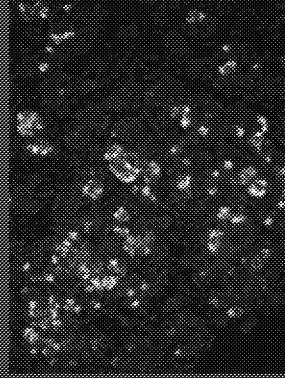
- Progenitor cells to treat BPD
- Development of pancreatic cell assay
- Effects of Epo and Darbe on neuronal cell growth and neuroprotection

Pancreatic Cell Assays

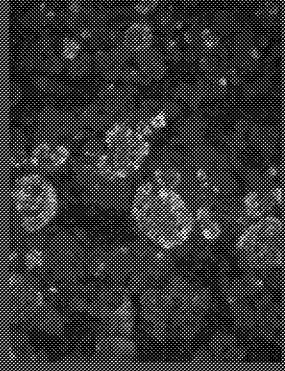
Fetal pancreas stained for insulin (red) and glucagon (green):



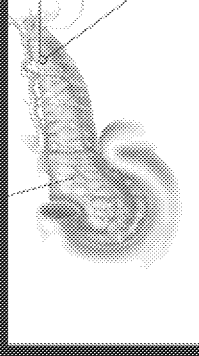
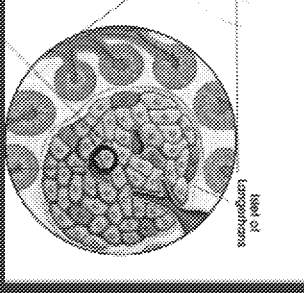
13.4 weeks



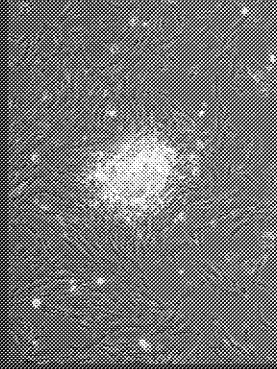
14 weeks



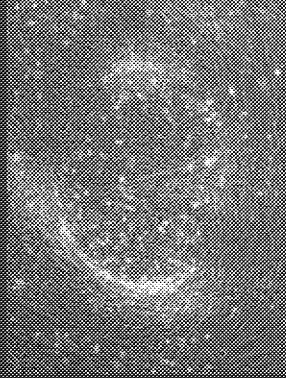
15.6 weeks



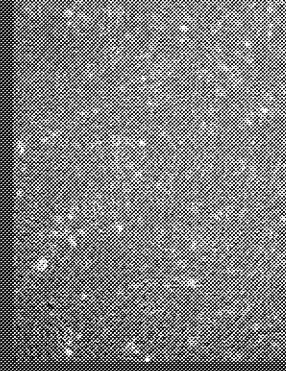
Fetal pancreas isolated, cultured and expanded:



1 week



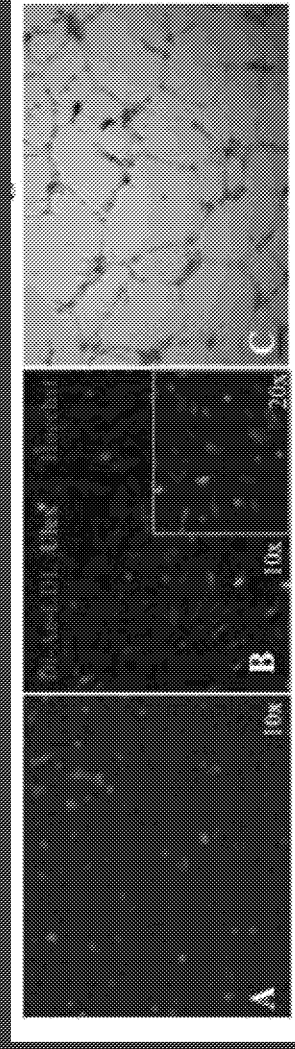
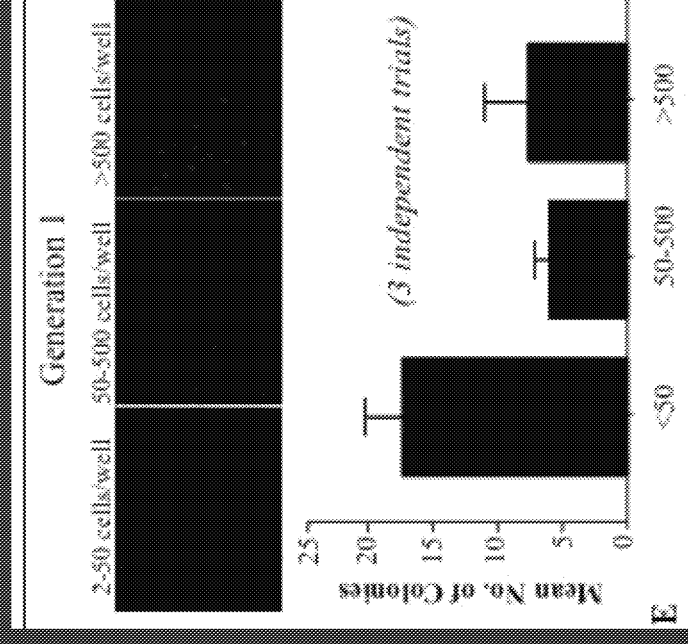
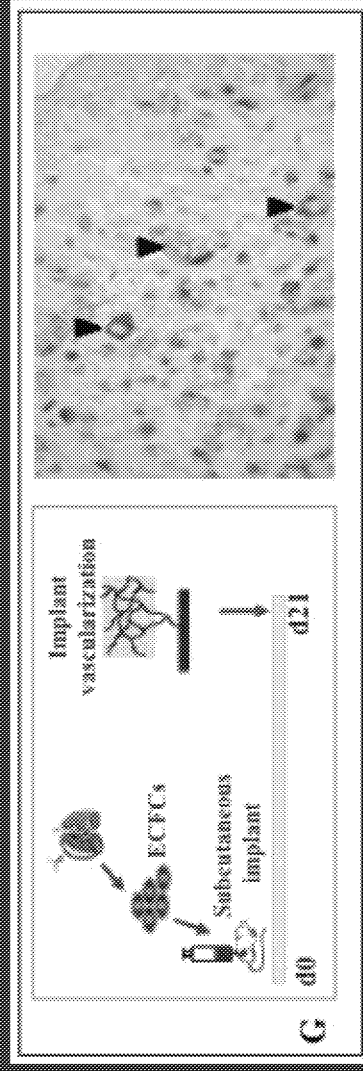
3 weeks



5 weeks

Progenitor cells and BPD

Progenitor cells (endothelial colony forming cells) are present in developing lung, can be isolated and expanded:



Fetal Brain Growth and Erythropoiesis Stimulating Agents (ESAs)

Erythropoietin (Epo): important growth factor for red cells

Hematologic properties of Epo known since 1980s

Darbe (long acting Epo) used for cancer/kidney disease

Neuroprotective properties recently being studied:

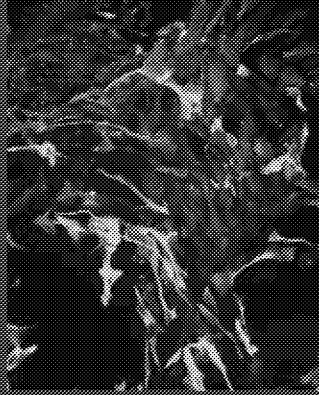
- **Protection from brain injury/bleeding in preterm infants**
- **Brain recovery in term babies with HIE**

Neuroprotective Effects of Epo

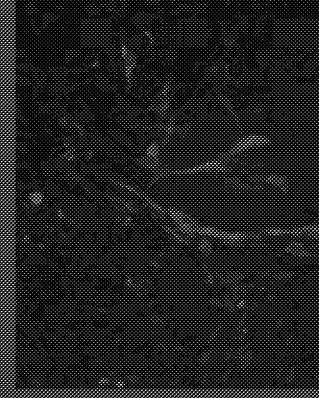
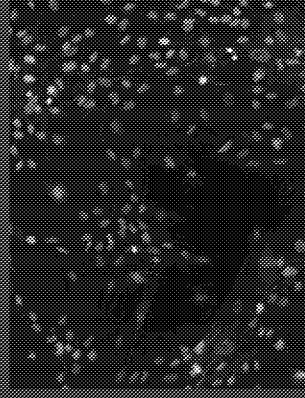
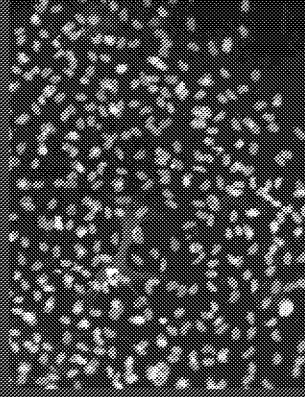
- Increases nerve cell growth
- Decreases neuronal susceptibility to injury
- Decreases neuronal cell death (apoptosis)
- Epo receptors present in developing human brain
- Clinical trials of Erythropoiesis Stimulating Agents (ESAs) for neuroprotection in preterm infants

Mixed Neuronal Cells Grown with Epo

No Epo



Epo
100 units/mL



Astrocytes
(GFAP)

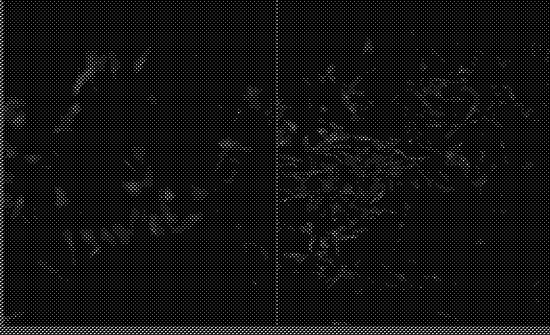
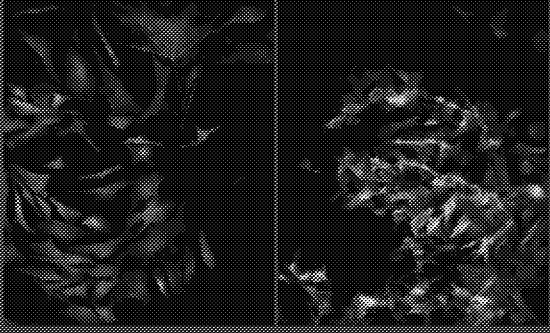
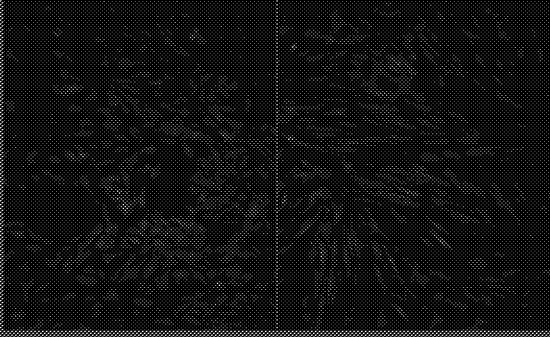
Neurons
(MAP2)

Neuronal Prgenitors
(Nestin)

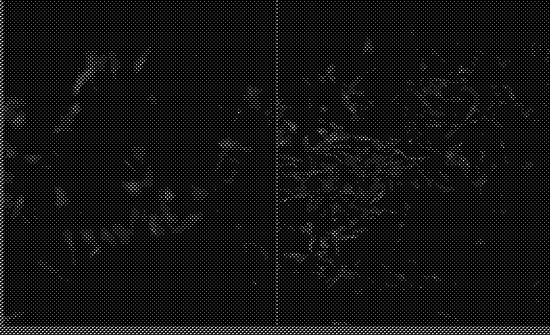
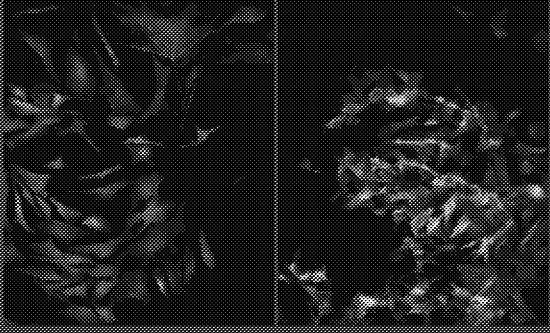
Mixed Neuronal Cells Grown with ESAs

Astrocytes Oligodendrocytes Neuronal progenitors

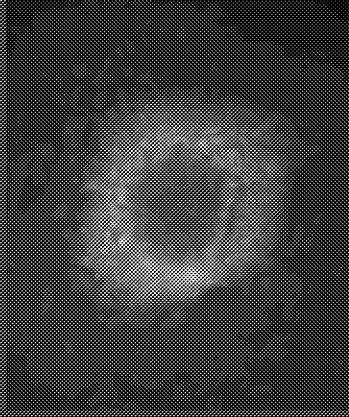
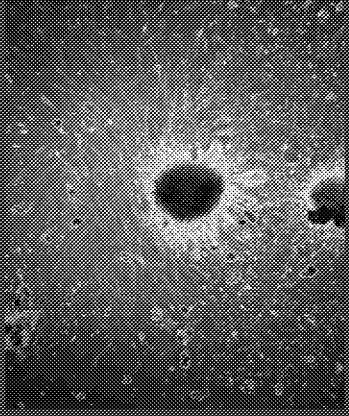
Epo



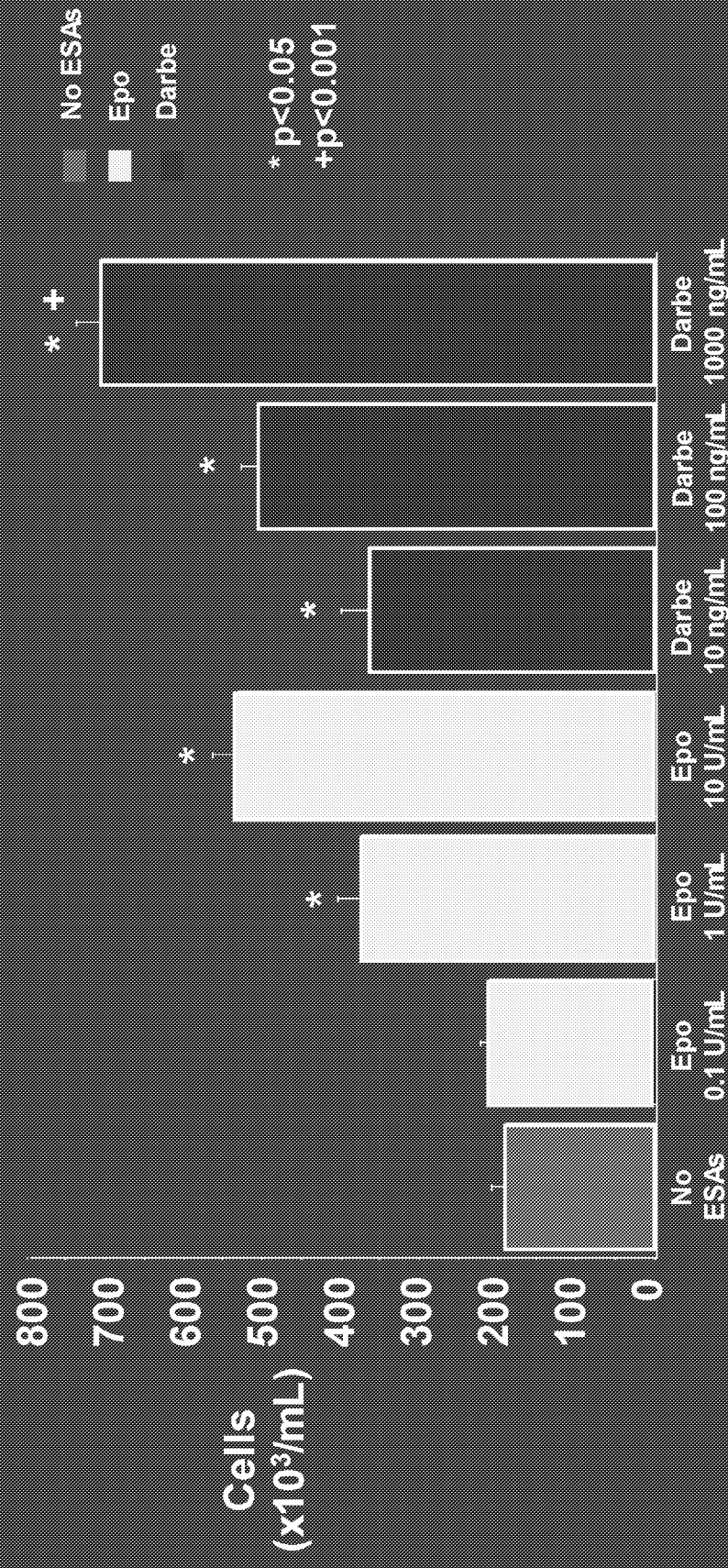
Darbe



Mature neurons
surrounding
Neurosphere:



Cell Counts Increased with Increasing Concentrations of ESAs

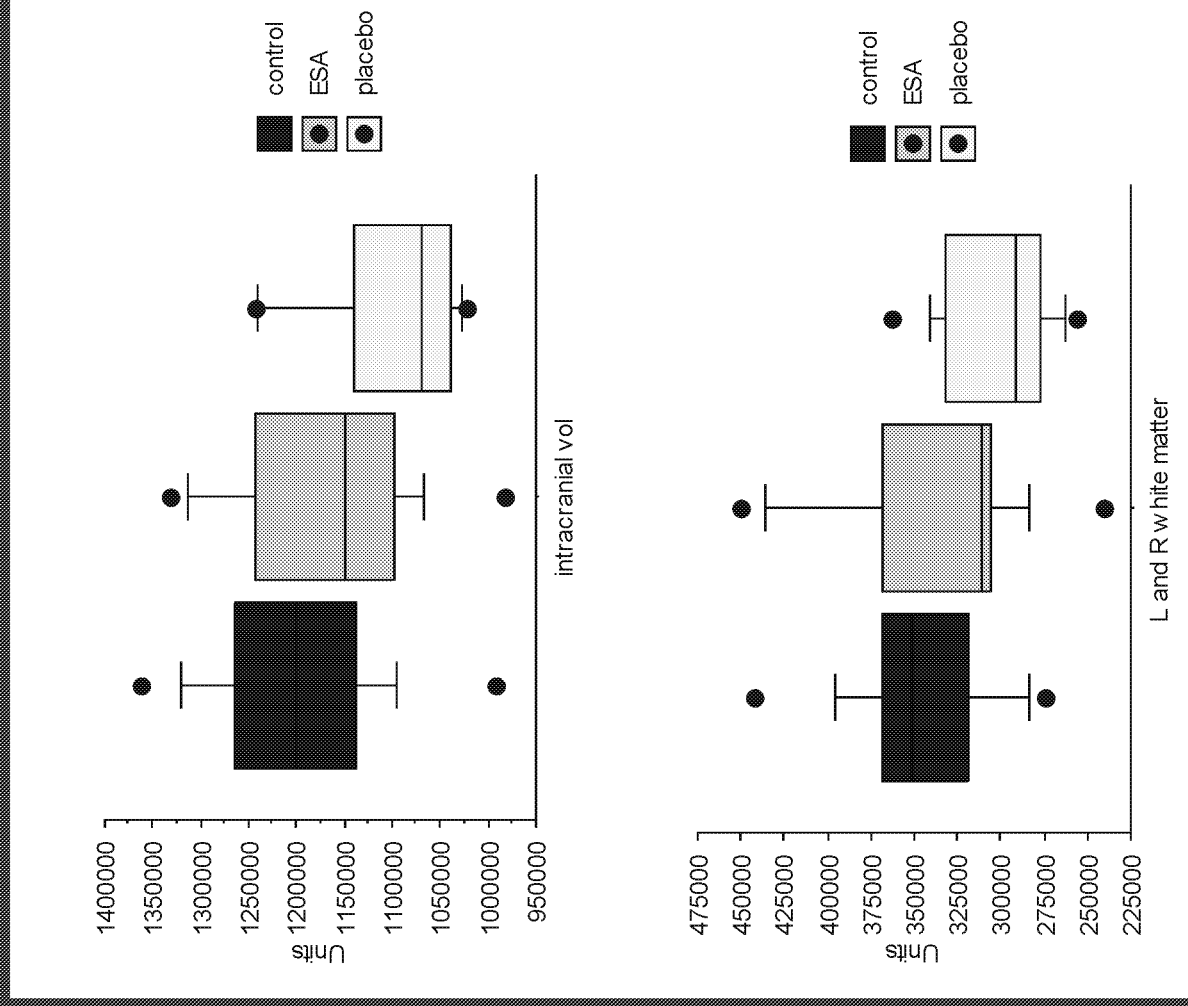


Neurodevelopmental Testing

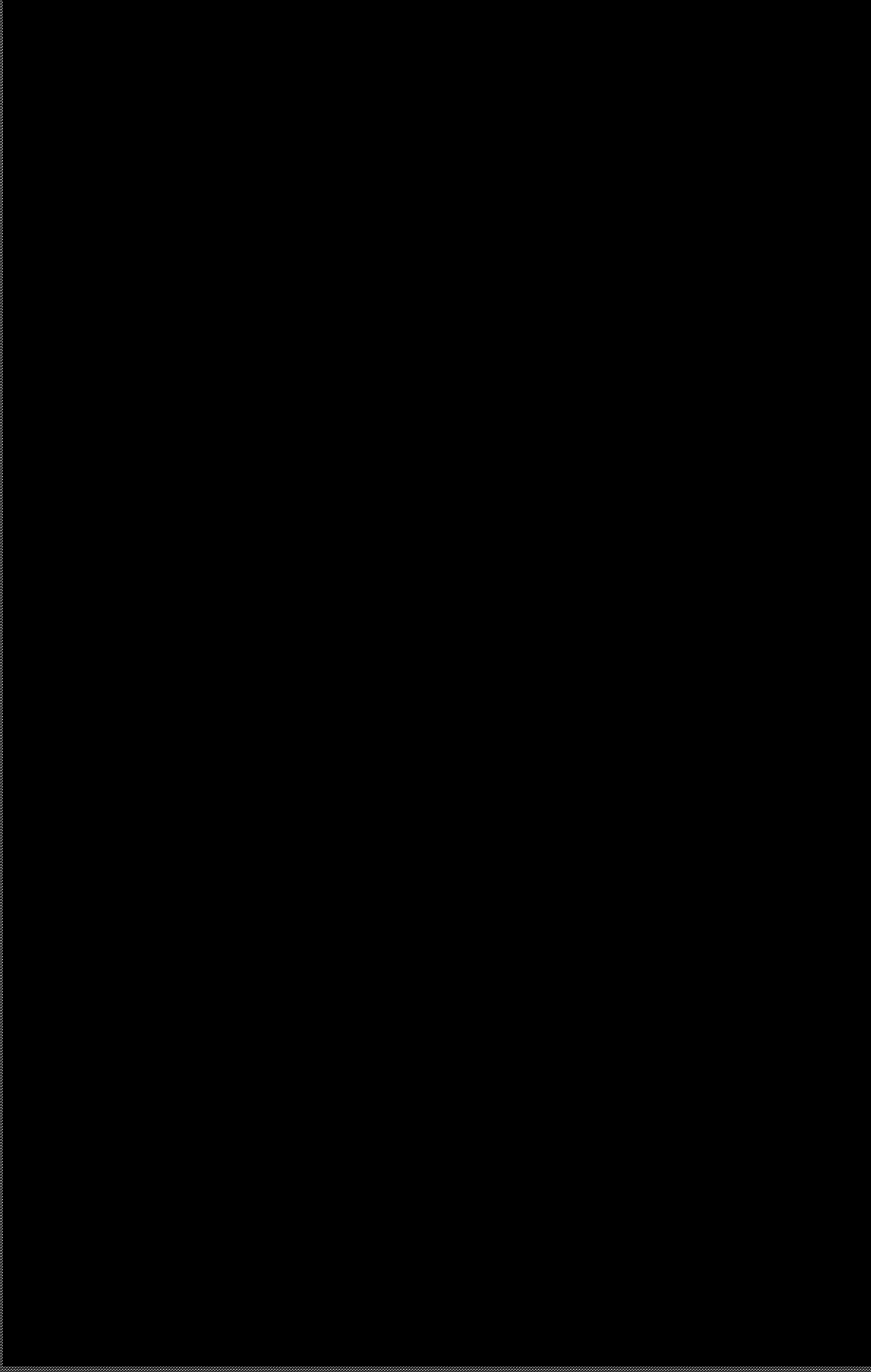
	Darbe (n=27)	Epo (n=29)	Placebo (n=24)	P =
Composite Cognitive	97±8	98±14	89±14	0.02
Composite Language	92±13	89±17	84±14	0.05
Cerebral Palsy	0/27	0/29	5/24	0.002
Object Permanence	2.8±0.4*	2.4±0.8	2.1±1.0	0.01

*p<0.05, Darbe versus Epo

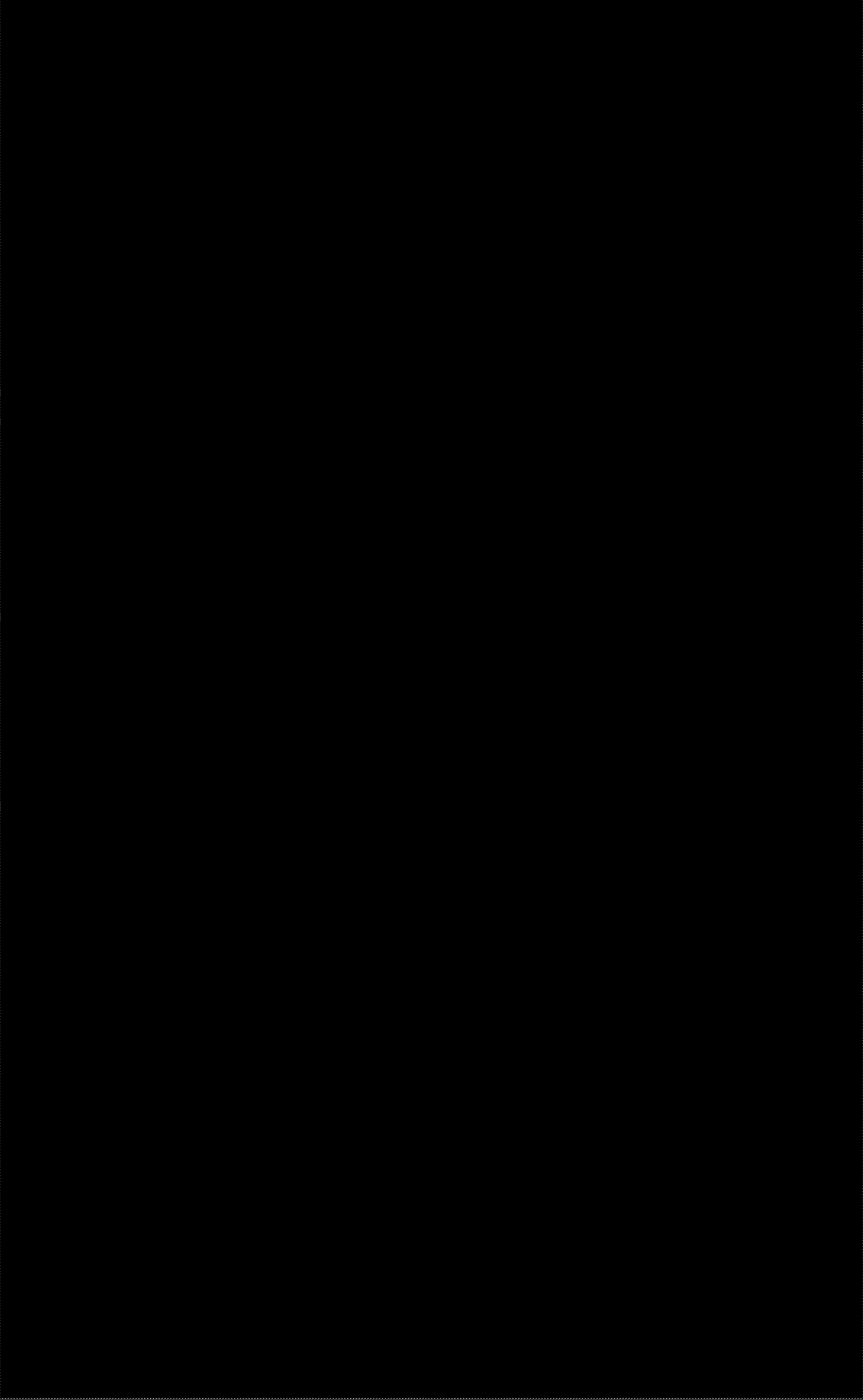
Total brain volume and white matter volume

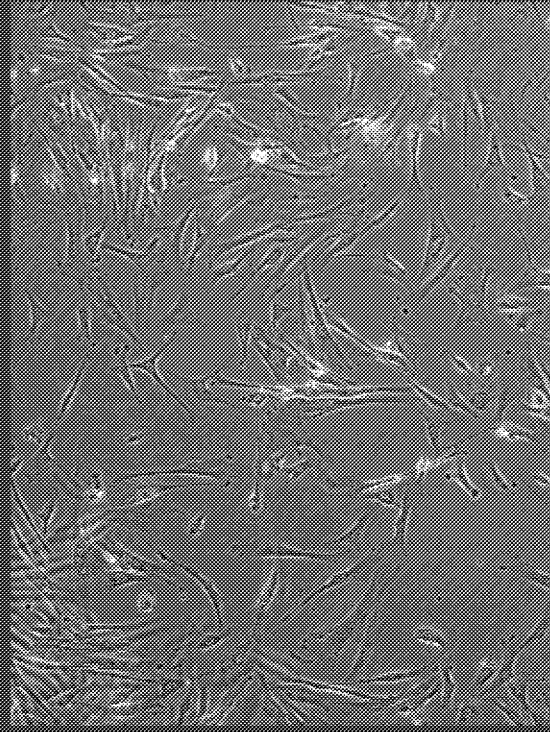


 Clinic, from the early crew....

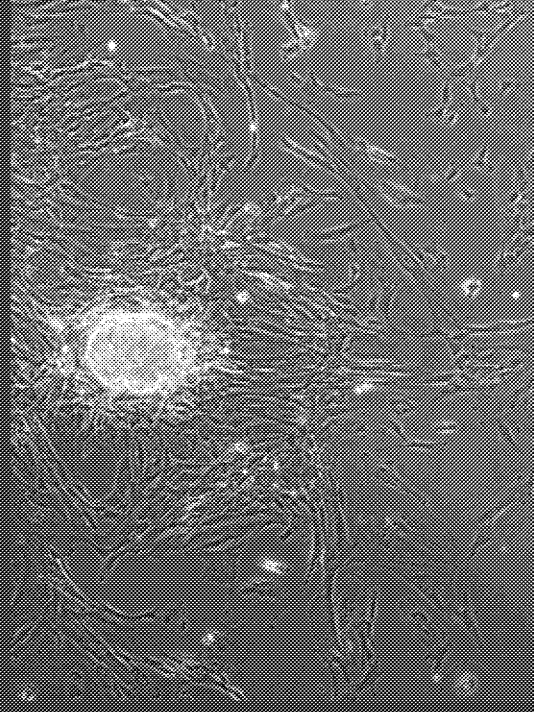


**To the current team,
thanks for all of your help and support!**

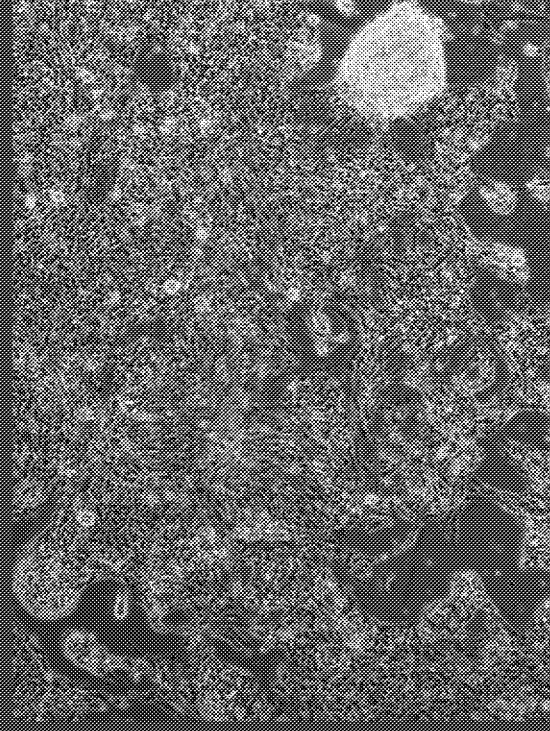




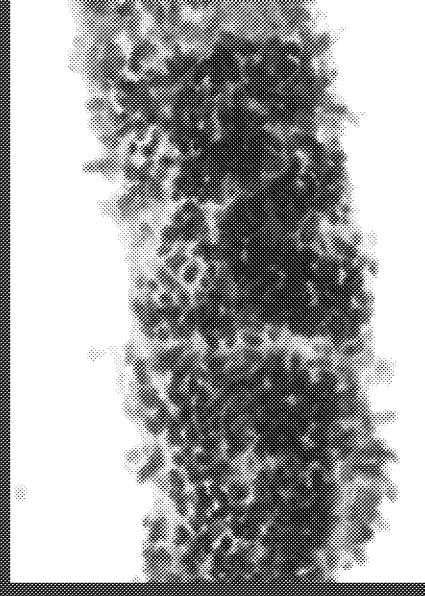
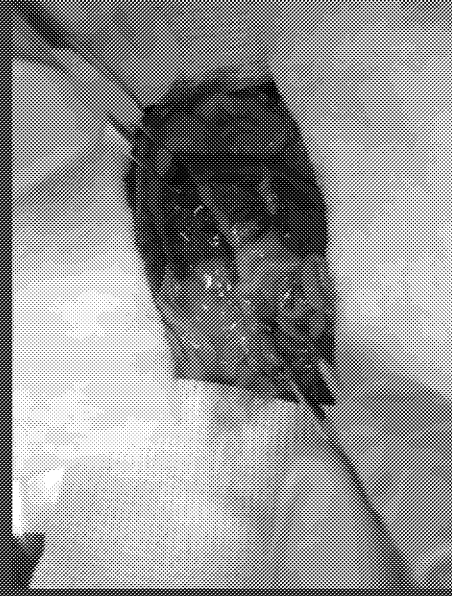
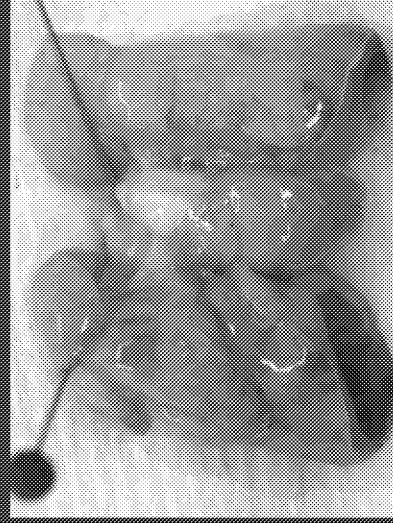
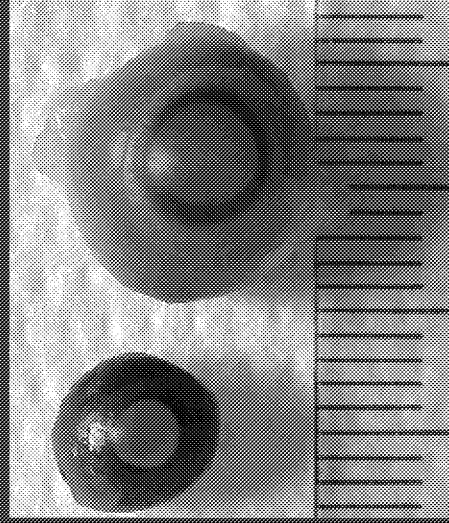
Heart



Brain



Retina



DREAM (Developmental Research, Education and Mentoring) Lab Research

1. ***Erythropoietin gene expression in developing liver and kidney (1995-2002)***: Preterm infants do not produce erythropoietin and as a result require multiple transfusions. To investigate the mechanism of erythropoietin production in normal developing human, we evaluated erythropoietin gene expression in fetal liver and kidney, two organs that are known to produce erythropoietin during fetal and post-natal life. **Funded** by a grant from UNMHSC G-CRC, NIH M01 RR 00997. HRRC #96-260)
2. ***The effect of Darbepoetin on the growth of fetal and neonatal erythroid progenitors (2002-2006)***: Prior to clinical studies in preterm infants, we evaluated the effects of Darbepoetin (a long acting red cell growth factor) versus erythropoietin on the growth of red cell progenitors obtained from human fetal liver, marrow, and blood. **Funded** by a grant from UNMHSC G-CRC, NIH M01 RR 00997, HRRC #02-388.
3. ***Methylation patterns in promoter and enhancer regions of the erythropoietin gene during fetal development (2004-08)***: Erythropoietin gene expression occurs primarily in the fetal liver during human development, and significant production by the kidney does not occur until after birth. Infants born prematurely have decreased production of erythropoietin and develop the anemia requiring transfusions. We evaluated the regulatory regions of the erythropoietin gene during human fetal development in order to identify methylation patterns in the promoter and enhancer regions of the erythropoietin gene in the fetal liver and kidney, and determine if methylation plays a role in the mechanism of enhanced erythropoietin production in fetal liver and suppressed production in fetal kidney. **Collaborator:** [REDACTED] **Funded** by a grant from UNM HSC RAC.
4. ***Gene expression in the developing human eye (2004-14)***: ROP is an important cause of blindness in infants born less than 28 weeks of gestation and weighing less than 1250 grams. A number of proteins responsible for blood vessel formation are required during development. Abnormal retinal blood vessel formation studies in diabetic retinopathy and mouse ROP models show increased levels of proteins such as MMP-2 and 9, VEGF, and Epo in the vitreous. We hypothesized that gene expression and protein concentrations were present in the developing human eye, and increase with gestational age. **Collaborator:** [REDACTED] University of South Florida. **Funded** by a grant from the Pediatric Research Committee at UNMHSC.
5. ***Cytomegalovirus-induced inflammatory response in fetal astrocytes is inversely related to glial differentiation (2006-09)***: This research was performed in collaboration with [REDACTED] [REDACTED] University of South Florida). Congenital cytomegalovirus (CMV) infection is the most common cause of non-hereditary sensorineural hearing loss in children. Congenital CMV infection affects about 1% of all live births in the US, where 10% are symptomatic at birth and another 10 to 15% develop hearing loss or other developmental problems during infancy. For unknown reasons, central nervous system CMV infections are more likely to be symptomatic when the fetus is infected during the first trimester of pregnancy. Because CMV-induced lesions are characterized by inflammation, we hypothesized that CMV-induced inflammatory changes depend on the stage of fetal development, and measured inflammatory responses of human fetal glial cells. **Collaborator:** [REDACTED] [REDACTED] University of South Florida.
6. ***Immunoregulatory mechanisms in the developing intestine and their relationship to necrotizing enterocolitis in preterm neonates (2007-present)***: This research is being performed in collaboration with [REDACTED] at the University of South Florida. Necrotizing enterocolitis (NEC) is a life-threatening gastrointestinal disease that affects 5–15% of extremely premature neonates. Existing evidence indicates that NEC develops as a severe inflammatory response to mucosal injury and bacterial invasion in the immature intestine. However, this inflammatory reaction

of the developing intestine during NEC contrasts with the inflammatory suppression to bacteria that is characteristic of the adult intestine. We hypothesize that NEC occurs in the premature neonate because normal mechanisms of tolerance to bacteria are developmentally regulated and therefore, deficient in the preterm intestine. **Collaborator:** [REDACTED] MD. **Funded by** NIH R01 HD59142: Role of TGF- β in NEC, [REDACTED]

7. ***Epsilon globin gene expression in the developing human fetus (2007-10):*** This research was performed with [REDACTED] neonatology fellow. We measured epsilon globin gene expression in human fetal liver, marrow, peripheral blood and placenta, as a means of determining if it can be used as a positive control in indentifying fetal nucleic acid in maternal plasma. Epsilon globin gene expression can be used to determine the presence of fetal nucleic acid in maternal plasma samples from RhD negative women, in order to identify the RhD status of the fetus, and ultimately to use this method for identification of fetal gene anomalies. **Funded by** a grant from the Pediatric Research Committee and a grant from the Signature Program in Child Health Research.
8. ***Quantification of endogenous controls during human fetal development (2008-12):*** Most studies evaluating quantitative gene expression use endogenous controls, or house keeping genes as a measure of starting RNA, however developmental expression of these genes has not been determined. We measured expression of commonly used endogenous controls in fetal tissues, in order to determine the optimal genes to use for each tissue at each gestational age.
9. ***Genetic polymorphisms in PDA development (2008-2010):*** We collaborated with [REDACTED] at the University of California San Francisco and [REDACTED] at the University of Iowa, who performed GWAS (Genome Wide Association Studies) to identify unique genetic markers associated with ductal development in the human fetus, and determining expression of genes known to be involved in persistence of the ductus arteriosus. **Collaborators:** [REDACTED]
[REDACTED]
10. ***Gene expression in developing human fetal skin (2009-present):*** The still-developing skin of extremely low birth weight (ELBW) infants functions ineffectively in maintaining hydration and preventing infection. Prior to evaluating changes in developmental gene expression in ELBW infant skin following preterm birth, we wish to determine the normal expression of genes during development, and are measuring gene expression of a number of important regulatory proteins. **Collaborators:** [REDACTED]
11. ***Effects of erythropoietin and darbepoetin on neuronal progenitors in developing human brain (2009-present):*** This research was performed with [REDACTED] and [REDACTED]. Animal and human clinical studies suggest that erythropoietin plays a potentially important role in blood vessel and brain cell formation in the central nervous system. Erythropoietin binds to receptors in the brain, activating mechanisms that include cell maturation, division, and importantly, inhibition of cell death. Few studies have evaluated the effects of erythropoietin on developing human neuronal tissue, and no studies have evaluated the effect of darbepoetin, a long acting erythropoietin currently being evaluated clinically in preterm infants, on brain cell growth. We are evaluating the effects of erythropoietin and darbepoetin on growth and differentiation of developing human neuronal cells. **Funded by** a Signature Program in Child Health Apprentice Grant.
12. ***Fetal lung stem cell isolation (2010-present):*** We are collaborating with [REDACTED] at the University of Toronto, isolating stem cells from developing human fetal lung. Animal studies suggest the lung can provide a variety of stem cells that can be used for tissue growth and repair. It is not clear whether these stem cells are present, and if so, in what quantities, in the developing human lung. **Collaborators:** [REDACTED] University of Toronto; [REDACTED] University of Indiana. **Funded by** the Canadian Institute of Health Research [REDACTED]

13. **Effects of erythropoietin on cardiomyocyte growth and differentiation during fetal development (2010-present):** Numerous animal and adult studies have reported a protective, anti-apoptotic and anti-inflammatory effect of erythropoietin on cardiac myocytes, as well as mitogenic and angiogenic effects. The effects of erythropoietin on developing human myocytes is not yet defined. We hypothesize that erythropoietin will increase cellular proliferation and differentiation of human fetal myocytes between 10 and 24 weeks gestation. **Collaborator:** [REDACTED]
14. **Methylation Patterns in Regions of Executive Function in the Developing Human Brain (2011-2013):** Methylation is a process that can change the way genes are activated or suppressed, thereby effecting cell growth and maturation. We evaluated 1) differences in patterns of methylation between specific brain regions, 2) the relationship between brain methylation and methylation in peripheral tissue such as the cheek, and 3) changes in methylation during human fetal development in prenatal and postmortem whole brain specimens. **Collaborators:** [REDACTED] **Funded by a grant from the Signature Program in Child Health Research at UNM HSC.**
15. **Effects of HIP2B on Gene Expression in Human Fetal Pancreatic Cells (2012-present):** Human proislet Peptide 2B (HIP2B, developed by CureDM) is a novel active binding fragment of a protein that increases production of proteins responsible for pancreatic development and islet differentiation. HIP2B has been studied in animal models, adult pancreatic tissue, and in immortalized pancreatic cell line, but has not been evaluated in the developing human fetal pancreas. Fetal pancreatic cell cultures contain significant populations of undifferentiated cells, allowing for further investigation of the effects of HIP2B on human pancreatic cell growth and differentiation, with potential for increasing cells that make insulin. **Collaborators:** [REDACTED] University of South Florida. **Funded by a grant from CureDM.**

The following UNM collaborators worked with the DREAM lab in obtaining research samples:

1. Peds Surgery and Internal Medicine (intestinal permeability during development; [REDACTED])
2. Pharmacology (human fetal cardiac cell isolation; [REDACTED] present);
3. Pediatrics/Neonatology (expression of adrenomedullin in fetal lung; [REDACTED])



Adaptation to Preterm Birth



At birth, premature adaptation to the extra-uterine environment creates significant developmental stressors in most organ systems. In order to understand how the transition from the in utero environment to the ex-utero preterm environment are managed by each organ system, we study gene expression in a variety of fetal tissues, including brain, heart, liver, kidney, pancreas, lung, eye and skin.

Erythropoiesis Stimulating Agents (ESAs)

Erythropoiesis stimulating agents (ESAs) such as Erythropoietin (Epo), are used to stimulate erythropoiesis (production of red blood cells). In preterm infants, ESAs have shown success in decreasing the number and volume of transfusions.

Darbepoetin alfa (Darbe) is a biologically modified long-acting ESA with an increased half life. We designed a study to assess whether, like Epo, Darbe would be effective in decreasing transfusions in preterm infants at high altitude centers in Utah, Colorado and New Mexico. We found a significant decrease in transfusions and donor exposures in the ESA treated infants, compared to placebo.

Recent studies demonstrate that ESAs may have beneficial non-hematopoietic effects, such as neuroprotection. The BRITe Team evaluated cognitive outcomes in preterm infants randomized to Darbe, Epo or placebo and found significantly higher scores in ESA recipients.

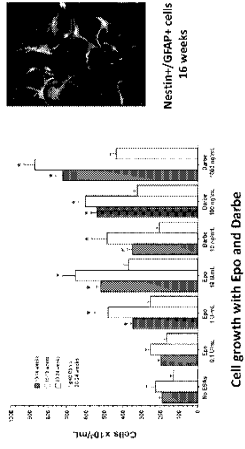
Neurodevelopmental Testing at 2 years

	Darbe (n=27)	Epo (n=29)	Placebo (n=24)	P =
Composite Cognitive	97 ± 8	98 ± 14	89 ± 13	0.01
Composite Language	92 ± 13	90 ± 17	84 ± 14	0.06
Object Permanence	2.8 ± 0.4	2.4 ± 0.8	2.2 ± 1.0	0.05
Cerebral Palsy	0/27	0/29	5/24	0.002
Visually Impaired	2/27	0/29	3/24	0.09
Hearing Impaired	1/27	3/29	3/24	0.24
Cognitive Score <85	0/27	3/29	6/24	0.01
Cognitive Score <80	0/27	3/29	5/24	0.03
Cognitive Score <70	0/27	1/29	2/24	0.29
Overall NDI (n)	11% (3)	21% (6)	46% (11)	0.01

Cognitive outcomes of darbe-treated infants administered to darbepoiesis, erythropoietin or placebo. *Pediatrics* 2012;130:1023-30.

Brain

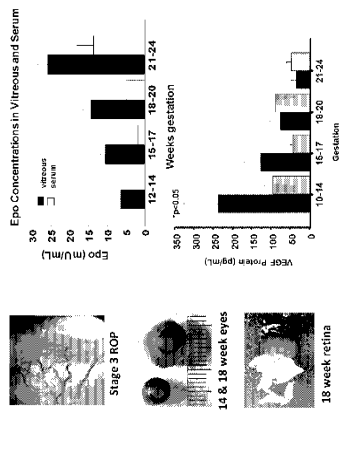
Neuroprotective Effects of ESAs: The non-hematopoietic effects of Epo have been performed in adult and neonatal animal models of neuroprotection. Epo has been shown in animal models to increase neurogenesis, improve the antioxidant response, decrease neuronal susceptibility to glutamate toxicity, and decrease neuronal apoptosis. DREAM Lab colleagues evaluated the effects of Epo and Darbe on the growth and phenotype of primary human fetal neuronal cells, and hypothesized that both ESAs would increase total cell numbers in a dose dependent fashion and have similar effects on cell phenotype. Absolute cell counts increased significantly in dose dependent fashion for both Epo and Darbe. Cells isolated from early and mid gestation (10-19 weeks) were more sensitive to both ESAs than cells isolated from later gestation (20-24 weeks). Immunofluorescent staining showed increased progenitors in Darbe-treated cultures.



Eye

Retinopathy of prematurity (ROP) is a well-known morbidity specific to the developing eye and involves the abnormal maturation of the retinal vasculature. Although evidence indicates ROP to be associated with multiple risk factors such as prematurity, oxygen use, low birth weight, infections, and poor postnatal weight gain, the cause of this disorder remains unclear.

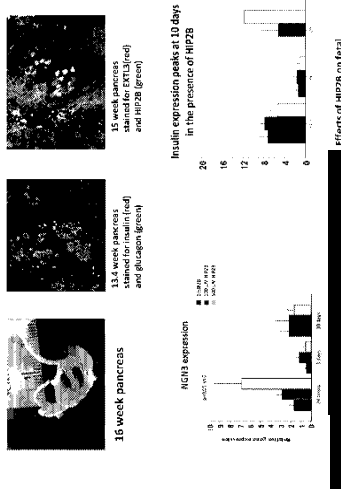
DREAM Lab colleagues evaluated concentrations of Epo and VEGF in developing eyes. We found increasing concentrations of both Epo and VEGF₁₂₁ in fetal vitreous, which are likely involved in the ontogeny of the fetal retinal vasculature during mid-gestation.



Concentrations in the developing human eye. *Retina* 2008;28:3942-7. NINDS04247.14. VEGF mRNA and protein concentrations in the developing human eye. *Pediatrics* 2010;126:1019-25.

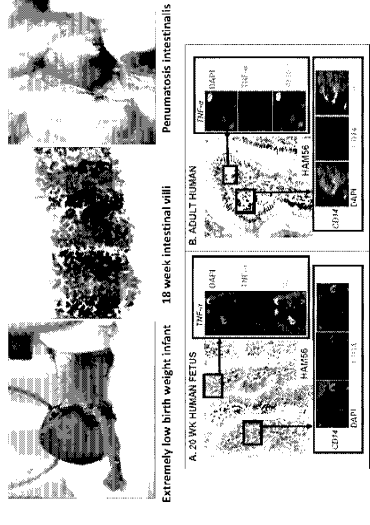
Pancreas

HIP2B is a peptide being developed by [redacted] and CureDM for human therapeutic use to stimulate islet neogenesis in both type 1 and type 2 diabetes patients. The mechanism of action of HIP2B has not been formally and fully elucidated and this research will help confirm and establish the pathway by which the peptide is active. We sought to develop a human fetal pancreatic cell model that would allow for further investigation of the effects of HIP2B on human pancreatic cell growth and differentiation. We found that gene expression of transcription factors involved in pancreatic progenitor cell differentiation was increased in dose dependent fashion in cells exposed to HIP2B. Insulin gene expression also increased in dose dependent fashion after 10 days of HIP2B culture.



GI Tract

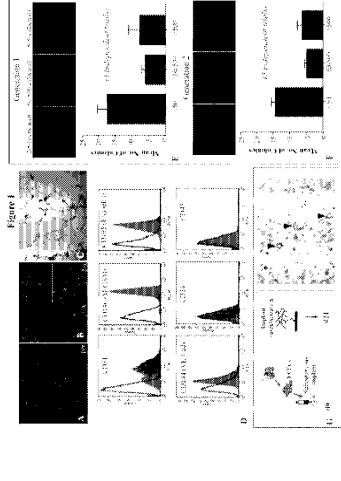
Necrotizing enterocolitis (NEC) is a life-threatening gastrointestinal disease that affects 5-15% of premature neonates that involves a severe inflammatory response in the immature intestine to mucosal injury and bacterial translocation. DREAM Lab colleagues showed that normal attenuation of macrophage inflammatory responses in the developing intestine is an effect of transforming growth factor (TGF)- β present in the extracellular matrix, and that TGF- β is the most important of the three TGF- β isoforms in intestinal macrophage differentiation. NEC was associated with decreased TGF- β expression, and in mice, deficient TGF- β signaling worsened the severity of NEC-like mucosal injury.



Inflammatory responses in the developing intestine. *Gastroenterology* 2011;140:242-53.

Lung

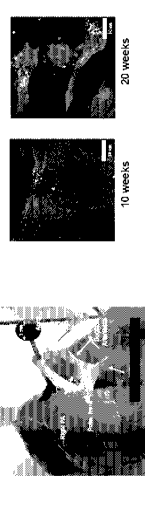
Bronchopulmonary dysplasia (BPD) and emphysema are life-threatening lung diseases characterized by alveolar simplification resulting from impaired alveolar development or alveolar destruction. Endothelial colony forming cells (ECFCs) represent a subset of endothelial progenitor cells capable of self-renewal and *de novo* vessel formation *in vivo*. DREAM Lab colleagues hypothesized that resident ECFCs exist in the developing lung, are impaired during arrested alveolar growth in experimental BPD, and that exogenous ECFCs can restore disrupted alveolar growth. Human fetal and neonatal rat lung contain ECFCs with robust proliferative potential, secondary colony formation upon replating, and *de novo* blood vessel formation *in vivo* when transplanted into immunodeficient mice. In contrast, human fetal lung ECFCs exposed to hyperoxia *in vitro* or ECFCs isolated from hyperoxic rat lungs displaying arrested alveolar growth mimicking BPD, proliferated less, showed decreased clonogenic capacity and formed fewer capillary-like networks on matrigel.



Existence, functional impairment, and repair potential of endothelial colony forming cells in oxygen-induced arrested alveolar growth. *Circulation* 2014;129:2144-57.

Heart

The ductus arteriosus allows for *in utero* communication between the pulmonary artery and the aorta; a persistent ductus arteriosus (PDA) results in major morbidity for preterm infants after birth. The presence of the rs2817359(A) allele of the gene TFAP2B is associated with PDAs that fail to close. DREAM Lab colleagues showed further mechanisms of changes in gene expression occurred in potassium and calcium channel genes regulating PDA after preterm birth.



Recent clinical studies have evaluated mitogenic, angiogenic and anti-apoptotic effects of Epo in cardiovascular cells. Pilot studies in adult patients with acute myocardial infarction have shown increased expression of anti-apoptotic genes, mobilization of circulating progenitors, and decreased infarction size. DREAM Lab colleagues found that progenitors made up 50% of cells from tissue under 15 weeks gestation, decreasing to 5% at 20+ weeks. Epo receptor gene expression increased with increasing exposure to Epo.

Patterns of gene expression in the ductus arteriosus are related to environmental and genetic risk factors for persistent ductus patency. *Pediatric Res* 2010;68:295-7.

Exhibit 6.30

Message

From:

[REDACTED]

Sent:

5/1/2014 10:38:44 PM

To:

[REDACTED]

Subject:

Fetal heart tissue next week

Hi [REDACTED]

Please let me know if you end up getting more fetal tissue next week and can still spare the heart. Isolating and culturing cells from last week's heart went well. I'll analyze which cell type predominates in cultures hopefully next week. I want to try different culture conditions with the next heart.

Thanks for including me in this opportunity.

~ [REDACTED]

~~~~~

[REDACTED]

University of New Mexico  
College of Pharmacy, Dept. of Pharmaceutical Sciences

[REDACTED]

[REDACTED]

Message

---

**From:**

[REDACTED]

**Sent:** 5/1/2014 11:56:49 PM

**To:**

[REDACTED]

**CC:**

**Subject:** Re: Fetal heart tissue next week

Hi [REDACTED]  
while [REDACTED] and I are in Vancouver for the PAS meetings next week, [REDACTED], our lab assistant, will be collecting tissue on Thursday and Friday. I've copied her on this email and will be sure she has your other contact info.  
Glad to hear it's going well!

On May 1, 2014, at 4:38 PM, "[REDACTED]" wrote:

Hi [REDACTED]

Please let me know if you end up getting more fetal tissue next week and can still spare the heart. Isolating and culturing cells from last week's heart went well. I'll analyze which cell type predominates in cultures hopefully next week. I want to try different culture conditions with the next heart.

Thanks for including me in this opportunity.

[REDACTED]  
~~~~~

[REDACTED]
University of New Mexico
College of Pharmacy, Dept. of Pharmaceutical Sciences

Message

From:

Sent: 5/21/2014 8:16:00 PM

To:

CC:

Subject: Brains for dissection

Hi [REDACTED] and [REDACTED]

I just spoke to the clinic about getting >22wk fetuses for our dissections. They have patients scheduled for surgery tomorrow that fit that range. I'll go pick them up later tomorrow afternoon when they're ready. Is there a specific time you'd like to do the brain floating?

Message

From:

Sent: 9/24/2014 9:11:46 PM

To:

CC:

Subject: Fetal heart tissue

Hi [REDACTED]

I'm very interested in getting a fetal heart this week if any are available. I understand that it's best for me to call you to see if one is available rather than waiting for your lab to call me. I'm hoping to check in tomorrow and/or Friday to see if you had any fetuses. What's the very best time to call you to come over and pick up the heart? Also, what is the best phone number?

I have been able to culture the cells, freeze them down and reconstitute them. However, I think that using my previous protocol, I mostly have fibroblasts. I'd like to try and select better for cardiomyocytes and cardiac progenitor cells. I'll analyze the cells by flow cytometry and immunofluorescence imaging to differentiate between populations.

I appreciate that your lab shares this tissue with us. Again, please let me know the optimum time to call (as well as the correct phone number).

Sincerely,

[REDACTED]
~~~~~  
[REDACTED]  
University of New Mexico  
College of Pharmacy, Dept. of Pharmaceutical Sciences  
[REDACTED]  
[REDACTED]

>>> [REDACTED] 5/9/2014 1:31 PM >>>

[REDACTED] please contact [REDACTED]

On May 9, 2014, at 12:11 PM, [REDACTED] wrote:

Hi there.

I'm not sure if you got fetal hearts yesterday or will get one today. I haven't heard anything about coming over to get the hearts. So I just want to make sure you have my correct contact info in case I'm just missing the calls. Or perhaps I'm supposed to just show up to your lab around 1 pm even if you don't call?

At any rate, contact info for next week if I'm supposed to wait for a call:

[REDACTED]  
[REDACTED] (My technician, [REDACTED] might answer and I've instructed her to pick up the heart if I'm not around)  
CELL: [REDACTED]

Thanks and hopefully see you next week. Have a great weekend!

~ [REDACTED]

~~~~~

[REDACTED]
University of New Mexico
College of Pharmacy, Dept. of Pharmaceutical Sciences
[REDACTED]

>>> [REDACTED] 5/1/2014 5:56 PM >>>

Hi [REDACTED]
While [REDACTED] and I are in Vancouver for the PAS meetings next week, [REDACTED] our lab assistant, will be collecting tissue on Thursday and Friday. I've copied her on this email and will be sure she has your other contact info.
Glad to hear it's going well!

On May 1, 2014, at 4:38 PM, "[REDACTED]" >> wrote:

Hi [REDACTED]

Please let me know if you end up getting more fetal tissue next week and can still spare the heart. Isolating and culturing cells from last week's heart went well. I'll analyze which cell type predominates in cultures hopefully next week. I want to try different culture conditions with the next heart.

Thanks for including me in this opportunity.

~ [REDACTED]

~~~~~

[REDACTED]  
University of New Mexico  
College of Pharmacy, Dept. of Pharmaceutical Sciences  
[REDACTED]

Message

---

**From:** [REDACTED]

**Sent:** 3/19/2015 3:52:07 PM

**To:** [REDACTED]

**CC:** [REDACTED]

**Subject:** RE: human tissue sections

Hi [REDACTED]

Next week works for me, although [REDACTED] will be on annual leave. We have some preserved developing brain samples that should work for you. Can you meet Monday morning around 11 AM?

[REDACTED]

**From:** [REDACTED]

**Sent:** Thursday, March 19, 2015 9:46 AM

**To:** [REDACTED]

**Cc:** [REDACTED]

**Subject:** human tissue sections

[REDACTED],

As we already talked about my lab would like to start using some human tissue for our research in at least two areas: 1) prenatal ethanol exposure, and 2) characterizing the function of an unknown protein that we think is involved with protein trafficking. I would like to get the process started by introducing my two students who are leading these two efforts, [REDACTED] and [REDACTED], respectively. Also, as we're trying to submit an R01 on the second project by late May I was wondering if we might try to at least stain for our protein of interest (NSG2) in some early brain sections, if you have them. Perhaps we could get together as a small group in the next few days to see what would be possible for collecting preliminary data, and perhaps proposing some experiments going forward.

Best,



Message

**From:** [REDACTED]

**Sent:** 3/19/2015 3:52:07 PM

**To:** [REDACTED]

**CC:** [REDACTED]

**Subject:** RE: human tissue sections

Hi [REDACTED]

Next week works for me, although [REDACTED] will be on annual leave. We have some preserved developing brain samples that should work for you. Can you meet Monday morning around 11 AM?

**From:** [REDACTED]

**Sent:** Thursday, March 19, 2015 9:46 AM

**To:** [REDACTED]

**Cc:** [REDACTED]

**Subject:** human tissue sections

[REDACTED],

As we already talked about my lab would like to start using some human tissue for our research in at least two areas: 1) prenatal ethanol exposure, and 2) characterizing the function of an unknown protein that we think is involved with protein trafficking. I would like to get the process started by introducing my two students who are leading these two efforts, [REDACTED] and [REDACTED], respectively. Also, as we're trying to submit an R01 on the second project by late May I was wondering if we might try to at least stain for our protein of interest (NSG2) in some early brain sections, if you have them. Perhaps we could get together as a small group in the next few days to see what would be possible for collecting preliminary data, and perhaps proposing some experiments going forward.

Best,





Message

---

**From:**

[REDACTED]

**Sent:** 4/20/2015 8:48:57 PM

**To:**

[REDACTED]

**CC:**

**Subject:** Brain tissue/sections

Dear Dr. [REDACTED],

You may recall our discussion from a few months back about trying to stain for our protein of interest in some early brain sections. I was wondering if you have and would be kindly willing to provide us with human fetal brain tissue so we could section and try out some preliminary staining experiments.

Sincerely

[REDACTED]

Message

---

**From:** [REDACTED]

**Sent:** 5/1/2015 5:58:59 PM

**To:** [REDACTED]

**Subject:** Re: brain-[REDACTED]

Okay thanks for letting me know. And thanks for contacting [REDACTED] about the [REDACTED] letter. Hopefully they will change it just a little and print on new letterhead.

What do you think about the paper?

---

**From:** [REDACTED]

**Sent:** Friday, May 1, 2015 11:27 AM

**To:** [REDACTED]

**Subject:** brain--[REDACTED]

[REDACTED] just came and took some brain tissue I had in the freezer in both TriZol and TPer, and one of the fixed brains. He doesn't think he'll be able to use such a large brain, and will bring it back if he cannot. He wanted to show it to his PI.

[REDACTED]

Albuquerque, NM 87131

[REDACTED]

# Exhibit 6.3 1

██████████

Thanks for the update, that is fantastic data! We will try to get later gestation lung for you, sometimes we can get up to 20-22 weeks, but it is unusual these days to get non-digoxin exposed samples beyond 18 weeks (i.e., no living tissues). We can get cord blood, which I am sure you can as well. What about MSCs from tracheal aspirates of ELBW infants? I know the yield would be low, but perhaps the first 48 hours of tracheal secretions could be collected. We will continue to look for later gestational age samples for you.

██████████

>>> ██████████ 8/1/2012 1:17 PM >>>

Dear Prof. ██████████ dear ██████████

Thank you very much for the lung samples you have sent me so far. I just want to give you a quick update on what I have done by now and what I am up to:

I managed to isolate the mesenchym from those tissues and showed that at 15.6 wk of age (the latest lung) all of the cells are what we call "Mesenchymal Stem Cell" by now. I have included FACS-data, showing the positivity for the standard MSC-markers CD105 (PerCP-Cy 5.5), CD90 (FITC) and CD73 (APC) as well as for the newly proposed CD146 (PE as drop-in in CD105/CD73/CD90 cocktail). The population is negative for CD34, CD45, CD14, CD19 and HLA-DR (as "negative Cocktail", all PE), fulfilling the actual criteria to state them MSC's. Interestingly, no GD2 (Disialoganglioside 2, PE as drop-in in CD105/CD73/CD90 cocktail) can be found on those cells: This marker has been described on MSC's from the bone marrow, non-expression on our cells supports the hypothesis of a huge MSC family with a large variety of differentially expressed markers. It is obvious that the term "MSC" represents are a huge family of cells, each with different properties, abilities, living in different niches of the body.

It has been described (Hershenson et.al.: *Pediatrics*, 2010 and *Am J Physiol Lung Cell Mol Physiol*, 2012) that resident lung MSC's (e.g. the ones I've isolated) play a major roll in the development of BPD, e.g. that there is a coincidence of MSC's in the tracheal aspirate and the risk to develop BPD later on. The (premature?) differentiation of MSC's into Myofibroblasts might be one of the major processes here. However, it still remains unclear how the Mesenchym with its stem cells and all the other resident lung cells interact in the normal and disrupted development, leading to either healthy or BPD-lung.

We want to address this point using

a) isolated MSC's from fetal lungs, showing their functional properties and abilities in Hyperoxia and Normoxia

b) a human fetal lung explant culture in Hyperoxia and Normoxia.

We also want to see if MSC's from the human umbilical cord have beneficial effects on cell survival, growth and development in those settings.

For all the experiments, it might be best to have "older" tissue >15 week of age, for the lung explant culture the oldest lung available is best. Prof. ██████████ told me, that you are working on the effects of Digoxin (right?) in extreme premature babies - is there a chance to get one of those lungs? I'm very excited about this collaboration and happy with the way it works right now! If you have any questions, please feel free to contact me via eMail or lab-phone.

Once again, thank you very much for the opportunity to work with those tissues!

Regards from Edmonton,

██████████

Ps: I also managed to isolate SP-C positive cells form the same sample, but have to fine-tune the separation process to increase the yield. I'll keep you posted.

Attachments:

Flow Cytometry Data for human fetal lung derived MSC's

Immunocytochemistry revealing a MSC - Myofibroblast subpopulation

# Exhibit 6.32

ONE HUNDRED FOURTEENTH CONGRESS

**Congress of the United States**

**House of Representatives**

COMMITTEE ON ENERGY AND COMMERCE

2125 RAYBURN HOUSE OFFICE BUILDING  
WASHINGTON, DC 20515-6115

Majority (202) 225-2927  
Minority (202) 225-3641

November 18, 2016

**By Email**

University of New Mexico  
c/o Stephen M. Ryan  
McDermott Will & Emery LLP  
500 North Capitol Street, N.W.  
Washington, DC 20001-1531

Dear Mr. Ryan:

I write to follow up with the University of New Mexico (UNM) regarding two matters. First, we would like to schedule a transcribed interview by telephone of the principal tissue technician who directly handled fetal tissue transfers between Southwestern Women's Options and UNM. Please let me know at your earliest opportunity whether such an interview can be scheduled for Monday, November 28, at 11:30 Eastern Standard Time.

Second, we ask that UNM follow up with complete responses to the questions below, which relate to the items listed in the schedule to the Panel's subpoena to UNM. These apply to the period from 2011 to the present:

1. When tissue is transferred between UNM and any other entity, are there any outlays of money from any party involved in the transaction? This would include shipping costs and any other expenses.
2. UNM's production includes (apparently duplicative) material transfer agreement questionnaires detailing costs for only two institutions: the University of South Florida (UNM 921, 1132, 1138, 3263) and Ottawa Hospital Research Institute (UNM 922, 1131, 1137). Are any such documents available for any other institutions?
3. UNM's production includes only one Federal Express form reflecting a shipment of fetal tissue (UNM 1113). Please produce all documents and communications, including accounting and billing records, relating to this Federal Express account as well as any other courier used for fetal tissue transfers.

4. Please detail, with all related documents, any payments UNM (including its faculty) receives from the University of South Florida, the Ottawa Hospital Research Institute, and any other entity that receives fetal tissue from UNM. Include a description of the purpose for each payment.
5. Other than payments, did any other entity that receives fetal tissue from UNM ever transfer or give anything of value to UNM? Does UNM have any other contracts with those entities?
6. Does any component of UNM have a budget or annual or other periodic report detailing income, projects, or expenditures relating to fetal tissue?
7. Please provide IRB approvals for each study involving UNM faculty that used fetal tissue.
8. Would UNM detail the gestational age of abortions performed at UNM facilities? Please include the number of second and third trimester abortions that have been performed at each facility.

Kindly have your client provide responses no later than November 30, 2016.

Sincerely,



T. March Bell  
Chief Counsel  
Select Investigative Panel

cc: Heather Sawyer  
General Counsel to Ranking Member Jan Schakowsky  
Select Investigative Panel



# Exhibit 6.33

**MATERIAL TRANSFER AGREEMENT  
FOR THE TRANSFER OF HUMAN MATERIALS  
FOR NON-PROFIT RESEARCH PURPOSES**

This Human Material Transfer Agreement ("MTA") is between the Regents of the University of New Mexico for its public operation known as the Health Sciences Center, specifically for the School of Medicine, Department of Obstetrics and Gynecology ("PROVIDER") located at HSC Financial Services – PreAward, MSC09 5220, 1 University of New Mexico, Albuquerque, NM 87131-0001, and The University of South Florida Board of Trustees, a public body corporate, for the University of South Florida ("RECIPIENT"), for the transfer of human material, with or without accompanying data, for research purposes as further defined below. PROVIDER and RECIPIENT may each be referred to as Party or collectively as Parties. This MTA will become effective on the date of the last signature below.

PROVIDER Investigator:

[REDACTED]

RECIPIENT Investigator:

[REDACTED]

RECIPIENT and PROVIDER agree as follows:

1. PROVIDER will transfer to RECIPIENT the following: fetal GI tissue (collectively "Human Material").
2. Descriptive title of RECIPIENT's research with Human Material is: Fetal GI Development ("Research Project").
3. RECIPIENT agrees to use Human Material for teaching and non-profit research purposes only and will not use Human Material for any commercial purposes, including selling, commercial screening, or transferring Human Material to a third party for commercial purposes.
4. RECIPIENT will only use Human Material for the Research Project.
5. RECIPIENT represents that it has obtained Institutional Review Board approval, as appropriate, to use Human Material.
6. THE RECIPIENT AGREES THAT THIS HUMAN MATERIAL MAY NOT BE USED IN HUMANS OR FOR ANY DIAGNOSTIC, PROGNOSTIC, OR TREATMENT PURPOSES.
7. RECIPIENT will allow the use of Human Materials only by RECIPIENT Investigator and RECIPIENT Investigator's research team that are under the direct supervision of RECIPIENT Investigator and only after they have been informed of and agreed to the provisions and restrictions stated herein. Any transfer of Human Material to other than RECIPIENT Investigator's research team requires the advanced written approval of PROVIDER.
8. All Confidential Information that is transferred between PROVIDER and RECIPIENT is subject to the following:

All information to be deemed confidential under this MTA shall be clearly marked "CONFIDENTIAL" by the providing Party and maintained in confidence by the receiving Party for a period of three (3) years from the receiving Party's receipt of the Confidential Information. Any Confidential Information that is orally disclosed must be reduced to writing and marked "CONFIDENTIAL" by the providing Party and such notice must be provided to the receiving Party within thirty (30) days of the oral disclosure.

For the purposes of this MTA, Confidential Information includes any scientific or business data relating to the Human Material that a Party asserts are confidential and proprietary, except for data that:

- a. have been published or otherwise publicly available at the time of disclosure to the receiving Party; were in the possession of or were readily available to the receiving Party without being subject to a confidentiality obligation from another source prior to the disclosure;
  - b. have become publicly known, by publication or otherwise, not due to any unauthorized act of the receiving Party;
  - c. the receiving Party can demonstrate it developed independently, or acquired without reference to, or reliance upon, such Confidential Information; or
  - d. are required to be disclosed by law, regulation, or court order.
9. RECIPIENT will not contact or make any effort to identify individuals who are or may be the sources of Human Material, without specific written approval from PROVIDER.
  10. RECIPIENT will comply with all laws, rules and regulations applicable to the handling and use of the Human Material.
  11. Either Party may terminate this MTA with sixty (60) days written notice to the other Party.
  12. When the Research Project is completed or this MTA is terminated, whichever comes first, any unused Human Material will either be destroyed in compliance with all applicable statutes and regulations or will be returned to the PROVIDER as requested by the PROVIDER.
  13. In all oral presentations or written publications concerning the use of Human Materials, RECIPIENT will acknowledge PROVIDER's contribution of Human Material unless requested otherwise by PROVIDER.
  14. Any Human Material delivered pursuant to this MTA is understood to be experimental in nature and may have hazardous properties. PROVIDER MAKES NO REPRESENTATIONS AND EXTENDS NO WARRANTIES OF ANY KIND, EITHER EXPRESSED OR IMPLIED. THERE ARE NO EXPRESS OR IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, OR THAT THE USE OF HUMAN MATERIAL WILL NOT INFRINGE ANY PATENT, COPYRIGHT, TRADEMARK, OR OTHER PROPRIETARY RIGHTS.
  15. No indemnification for any loss, claim, damage, or liability is intended or provided by either Party under this MTA. Each Party shall be liable for any loss, claim, damage, or liability that said Party incurs as a result of said Party's activities under this MTA, except that the

PROVIDER's liability as an State Funded Public Institution of Higher Education, will be subject in all cases to the immunities and limitations of the New Mexico Tort Claims Act, sections 41-4-1 *et. seq.* NMSA 1978, as amended.

The Parties have executed this MTA by their respective duly authorized officers on the day and year hereinafter written. Any communication or notice to be given shall be forwarded in writing to the respective addresses listed below.

FOR PROVIDER:

[Redacted Signature] \_\_\_\_\_  
(Signature of Authorized Official)

[Redacted Title]  
Vice Chancellor for Research, HSC

3/24/16  
Date

Mailing Address for Notices:  
HSC Financial Services – PreAward  
MSC09 5220, 1 University of New Mexico  
Albuquerque, NM 87131-0001

ACKNOWLEDGED BY:  
PROVIDER INVESTIGATOR

[Redacted Signature] \_\_\_\_\_  
(Signature)

Date

RECIPIENT INVESTIGATOR

[Redacted Signature] \_\_\_\_\_  
(Signature)

3-14-16

Date

FOR RECIPIENT:

[Redacted Signature] \_\_\_\_\_  
(Signature of Authorized Official)  
(Printed Name and Title) Director, Patents & Licensing

3/14/16  
Date



Mailing Address for Notices:

[REDACTED]  
Cell [REDACTED]

Bday [REDACTED]

Lab:

U of So. FL

12901 Bruce B Downs Blvd

[REDACTED]  
Tampa FL 33612

[REDACTED]@health.usf.edu

FedEx office for Saturday pickup:

5101 W. Waters Ave.

Tampa, FL 33634

(800) 463-3339

Peds FedExacct [REDACTED]

Ref

997647

CONFIDENTIAL

UNM03460

**1 From** Please print and press hard.  
 Date 6-24-16 Sender's FedEx Account Number [REDACTED]  
 Sender's Name [REDACTED] Phone (505) [REDACTED]  
 Company U. of N.M.  
 Address 915 Camino de Salud NE Dept./Floor/Suite/Room [REDACTED]  
 City Albuquerque State NM ZIP 87131

**2 Your Internal Billing Reference**  
 First 24 characters will appear on invoice. 997647 12.3 m

**3 To**  
 Recipient's Name [REDACTED] Phone 773 [REDACTED]  
 Company % FedEx (800) 463-3339  
 Address 5101 W. Waters Ave. Dept./Floor/Suite/Room [REDACTED]  
 Address Fa  
 Use this line for the HOLD location address or for continuation of your shipping address.  
 City Tampa State FL ZIP 33634

**4 Express Package Service** \* To most locations. Packages up to 150 lbs. For packages over 150 lbs., use the new FedEx Express Freight US Airbill.  
 NOTE: Service order has changed. Please select carefully.

| Next Business Day                                                                                                                                                                                            | 2nd Business Day                                                                                                                                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> FedEx First Overnight<br>Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected. | <input type="checkbox"/> FedEx 2Day A.M.<br>Second business morning.* Saturday Delivery NOT available.                                                  |
| <input type="checkbox"/> FedEx Priority Overnight<br>Next business morning.* Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected.                                              | <input type="checkbox"/> FedEx 2Day<br>Second business afternoon.* Thursday shipments will be delivered on Monday unless SATURDAY Delivery is selected. |
| <input type="checkbox"/> FedEx Standard Overnight<br>Next business afternoon.* Saturday Delivery NOT available.                                                                                              | <input type="checkbox"/> FedEx Express Saver<br>Third business day.* Saturday Delivery NOT available.                                                   |

**5 Packaging** \* Declared value limit \$500.  
☐ FedEx Envelope\* ☐ FedEx Pak\* ☐ FedEx Box ☐ FedEx Tube ☒ Other

**6 Special Handling and Delivery Signature Options**  
☒ SATURDAY Delivery  
NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.  
☐ No Signature Required  
Package may be left without obtaining a signature for delivery.  
☐ Direct Signature  
Someone at recipient's address may sign for delivery. Few applies.  
☐ Indirect Signature  
If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only. Few applies.

Does this shipment contain dangerous goods?  
 One box must be checked.  
☒ No ☐ Yes As per attached Shipper's Declaration. ☐ Yes Shipper's Declaration not required. ☐ Dry Ice  
Dry Ice, 9 UN 1845 x kg  
 Dangerous goods (including dry ice) cannot be shipped in FedEx packaging or placed in a FedEx Express Drop Box. ☐ Cargo Aircraft Only

**7 Payment Bill to:**  
 Enter FedEx Acct. No. or Credit Card No. below.  
☒ Sender Acct. No. in Section 1 will be billed. ☐ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check  
 FedEx Acct. No. Credit Card No. Exp. Date  
 Total Packages Total Weight Total Declared Value†  
 1 3.00 lb (M) 118.99

**Easy new Peel-and-Stick airbill. No pouch needed.**  
 Apply airbill directly to your package. See directions on back.

Your liability is limited to \$100 unless you declare a higher value. See back for details. By using this Airbill you agree to the service conditions on the back of this Airbill and in the current FedEx Service Guide, including terms that limit our liability.

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Subject to additional charges. See FedEx Service Guide at [fedex.com](http://fedex.com) for details. All merchandise sales final.

Visit us at: [fedex.com](http://fedex.com)  
 Or call 1.800.GoFedEx  
 1.800.463.3339

June 24, 2016 4:25:12 PM

H = Weight entered manually  
 S = Weight read from scale  
 T = Taxable item

Shipment subtotal: 118.99  
 Total Due: 118.99  
 FedEx Account: 118.99  
 \*\*\*\*\*

**FIRST OVERNIGHT**  
 807952165260 3.00 lb (M) 118.99  
 SDR Delivery

Scheduled Delivery Date 06/25/2016

Location: ABQA  
 Device ID: ABQA-POS2  
 Employee: 5042520  
 Transaction: 870210605672

1501 RENAISSANCE BLVD  
 Albuquerque, NM 87107





FedEx Tracking Number 8079 5216 5270

Form ID No. 0200

## 1 From Please print and press hard.

Date 5.25.16

Sender's FedEx Account Number

Sender's Name

Phone (505)

Company U of N.M.

Address 915 Camino de Salud NE,

Dept./Floor/Suite/Room

City ABC

State NM

ZIP 87131

## 2 Your Internal Billing Reference

First 24 characters will appear on invoice.

997647 12.3m

## 3 To Recipient's Name

Phone (773)

Company LI. of So. FL

Address 12901 Bruce B. Downs Blvd.

HOLD Weekday  
FedEx location address  
REQUIRED. NOT available for  
FedEx First Overnight.HOLD Saturday  
FedEx location address  
REQUIRED. Available ONLY for  
FedEx Priority Overnight and  
FedEx 2Day to select locations.

Address

Use this line for the HOLD location address or for continuation of your shipping address.

City Tampa

State FL

ZIP 33612

## 4 Express Package Service

\* To most locations.

NOTE: Service order has changed. Please select carefully.

Packages up to 150 lbs.  
For packages over 150 lbs., use the new  
FedEx Express Freight US Airbill.

## Next Business Day

☐ FedEx First Overnight

Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected.

☒ FedEx Priority Overnight

Next business morning. Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected.

☐ FedEx Standard Overnight

Next business afternoon. Saturday Delivery NOT available.

## 2nd Business Day

☐ FedEx 2Day A.M.

Second business morning. Saturday Delivery NOT available.

☐ FedEx 2Day

Second business afternoon. Thursday shipments will be delivered on Monday unless SATURDAY Delivery is selected.

☐ FedEx Express Saver

Third business day. Saturday Delivery NOT available.

## 5 Packaging

\* Declared value limit \$500.

☐ FedEx Envelope\*☐ FedEx Pak\*☐ FedEx Box☐ FedEx Tube☒ Other

## 6 Special Handling and Delivery Signature Options

☐ SATURDAY Delivery

NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.

☐ No Signature Required

Package may be left without obtaining a signature for delivery.

☐ Direct Signature

Someone at recipient's address may sign for delivery. Fee applies.

☐ Indirect Signature

If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only. Fee applies.

## Does this shipment contain dangerous goods?

One box must be checked.

☒ No☐ Yes

As per attached Shipper's Declaration.

☐ Yes

Shipper's Declaration not required.

☐ Dry Ice

Dry Ice, 8, UN 1845

x kg

☐ Cargo Aircraft Only

## 7 Payment Bill to:

Enter FedEx Acct. No. or Credit Card No. below.

☒ Sender

Acct. No. in Section I will be billed.

FedEx Acct. No.

Credit Card No.

☐ Recipient☐ Third Party☐ Credit Card☐ Cash/Check

Exp. Date

Total Packages

Total Weight

Total Declared Value<sup>1</sup>

lbs. \$ 00

<sup>1</sup>Our liability is limited to US\$100 unless you declare a higher value. See back for details. By using this Airbill you agree to the service conditions on the back of this Airbill and in the current FedEx Service Guide, including terms that limit our liability.

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S = Weight read from scale  
T = Taxable itemSubject to additional charges. See FedEx Service Guide at [fedex.com](http://fedex.com) for details. All merchandise sales final.Visit us at: [fedex.com](http://fedex.com)  
Or call 1.800.GoFedEx  
1.800.463.3339

May 25, 2016 4:31:23 PM

Shipment subtotal: 34.29  
Total Due: 34.29  
FedEx Account: \*\*\*\*\*  
34.29PRIORITY OVERNIGHT  
807952165270 5.60 lb (S) 34.29  
Scheduled Delivery Date 05/26/2016Location: ABQA  
Device ID: ABQA-POS3  
Employee: 775868  
Transaction: 870203588674FedEx  
1501 N RENAISSANCE BLVD  
ALBUQUERQUE, NM 87107

CONFIDENTIAL

UNM03462

**1 From** Please print and press hard.

Date 4-14-16 Sender's FedEx Account Number [REDACTED]  
Sender's Name [REDACTED] Phone (505) [REDACTED]

Company University of New Mexico  
Address 915 Camino de Salud NE, [REDACTED]  
City Albuquerque State NM ZIP 87131

**2 Your Internal Billing Reference**

First 24 characters will appear on invoice. 997647 Research 13 wk G1+BM

**3 To**

Recipient's Name [REDACTED] Phone (773) [REDACTED]

Company Univ. of So. Florida

Address [REDACTED]  
We cannot deliver to P.O. boxes or F.O. ZIP codes. Dept./Floor/Suite/Room

Address 12901 Bruce B. Downs Blvd.  
Use this line for the HOLD location address or for continuation of your shipping address.

City Tampa State FL ZIP 33612

**HOLD Weekday**  
FedEx location address  
REQUIRED. NOT available for  
FedEx First Overnight.  
☐ **HOLD Saturday**  
FedEx location address  
REQUIRED. Available ONLY for  
FedEx Priority Overnight and  
FedEx 2Day to select locations.

**4 Express Package Service**

\*To most locations.  
NOTE: Service order has changed. Please select carefully.

Packages up to 150 lbs.  
For packages over 150 lbs, use the new  
FedEx Express Freight US Airbill.

**Next Business Day**

☐ **FedEx First Overnight**  
Earliest next business morning delivery to select  
locations. Friday shipments will be delivered on  
Monday unless SATURDAY Delivery is selected.

☒ **FedEx Priority Overnight**  
Next business morning.\* Friday shipments will be  
delivered on Monday unless SATURDAY Delivery  
is selected.

☐ **FedEx Standard Overnight**  
Next business afternoon.\*  
Saturday Delivery NOT available.

**2nd Business Days**

☐ **FedEx 2Day A.M.**  
Second business morning.\*  
Saturday Delivery NOT available.

☐ **FedEx 2Day**  
Second business afternoon.\* Thursday shipments  
will be delivered on Monday unless SATURDAY  
Delivery is selected.

☐ **FedEx Express Saver**  
Third business day.\*  
Saturday Delivery NOT available.

**5 Packaging** \*Declared value limit \$500.

☐ FedEx Envelope\* ☐ FedEx Pak\* ☐ FedEx Box ☐ FedEx Tube ☒ Other

**6 Special Handling and Delivery Signature Options**

☐ **SATURDAY Delivery**  
NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.

☐ **No Signature Required**  
Package may be left without  
obtaining a signature for delivery.

☐ **Direct Signature**  
Someone at recipient's address  
may sign for delivery. Fee applies.

☐ **Indirect Signature**  
If no one is available at recipient's  
address, someone at a neighboring  
address may sign for delivery. For  
residential deliveries only. Fee applies.

**Does this shipment contain dangerous goods?**

One box must be checked.  
☒ No ☐ Yes As per attached Shipper's Declaration ☐ Yes Shipper's Declaration not required.  
Dangerous goods (including dry ice) cannot be shipped in FedEx packaging or placed in a FedEx Express Drop Box. ☐ Dry Ice Dry Ice, 5 UN 1845 x kg ☐ Cargo Aircraft Only

**7 Payment Bill to:**

Enter FedEx Acct. No. or Credit Card No. below.  
☒ Sender Acct. No. in Section I will be billed. ☐ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check  
FedEx Acct. No. ☐ Date

Total Packages 1 Total Weight 3.50 lb (M) Total Declared Value<sup>1</sup> \$0

<sup>1</sup>Our liability is limited to US\$100 unless you declare a higher value. See back for details. By using this Airbill you agree to the service conditions on the back of this Airbill and in the current FedEx Service Guide, including terms that limit our liability.

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Visit us at: [fedex.com](http://fedex.com)  
Or call 1.800.GoFedEx  
1.800.463.3339

April 14, 2016 4:41:32 PM

H = Weight entered manually  
S = Weight read from scale  
T = Taxable item

Shipment subtotal: 31.02  
Total Due: 31.02  
FedEx Account: \*\*\*\*\* 31.02

**PRIORITY OVERNIGHT**  
807952165292 3.50 lb (M) 31.02  
Scheduled Delivery Date 04/15/2016

Location: ABQA  
Device ID: ABQA-POS2  
Employee: 5042520  
Transaction: 870198827696

**FedEx**  
1501 RENAISSANCE BLVD  
Albuquerque, NM 87107



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**FedEx**1501 RENAISSANCE BLVD  
Albuquerque, NM 87107Location: ABQA  
Device ID: ABQA-POS2  
Employee: 5042520  
Transaction: 870188546818**PRIORITY OVERNIGHT**

807952165307

3.20 1b (M) 32.38

Scheduled Delivery Date 03/24/2016

Shipment subtotal: 32.38

Total Due: 32.38

FedEx Account: 32.38

\*\*\*\*\*

M = Weight entered manually  
S = Weight read from scale  
T = Taxable itemSubject to additional charges. See FedEx Service Guide  
at fedex.com for details. All merchandise sales final.Visit us at: [fedex.com](http://fedex.com)  
Or call 1.800.GoFedEx  
1.800.463.3339

March 23, 2016 6:30:27 PM

4 Express Package Service \* To most locations. \* To most locations. Please select carefully. For packages over 150 lbs, use the new FedEx Express freight US Airbill.

5 Packaging \* Declared value limit \$500

6 Special Handling and Delivery Signature Options

7 Payment Bill to:

8 Total Packages Total Weight Total Declared Value

9 Location: ABQA  
Device ID: ABQA-POS2  
Employee: 5042520  
Transaction: 870188546818

10 Priority Overnight 3.20 1b (M) 32.38

11 Scheduled Delivery Date 03/24/2016

12 Shipment subtotal: 32.38

13 Total Due: 32.38

14 FedEx Account: 32.38

15 \*\*\*\*\*

16 M = Weight entered manually  
S = Weight read from scale  
T = Taxable item

17 Subject to additional charges. See FedEx Service Guide at fedex.com for details. All merchandise sales final.

18 Visit us at: [fedex.com](http://fedex.com)  
Or call 1.800.GoFedEx  
1.800.463.3339

19 March 23, 2016 6:30:27 PM

Easy new Peel-and-Stuck airbill. No pouch needed.



1 From Please print and pass hard.

2 Your Internal Billing Reference

3 To

4 Sender's Name

5 Sender's Address

6 Sender's City

7 Sender's State

8 Sender's ZIP

9 Sender's Phone

10 Sender's Fax

11 Sender's Email

12 Sender's Account Number

13 Sender's Date

14 Sender's Time

15 Sender's Time Zone

16 Sender's Time Offset

17 Sender's Time Offset

18 Sender's Time Offset

19 Sender's Time Offset

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91 Sender's Time Offset

92 Sender's Time Offset

93 Sender's Time Offset

94 Sender's Time Offset

95 Sender's Time Offset

96 Sender's Time Offset

97 Sender's Time Offset

98 Sender's Time Offset

99 Sender's Time Offset

100 Sender's Time Offset

**FedEx** NEW Package  
US Airbill  
Tracking Number 8079 5216 5307

Form 0200



NEW Package  
US Airbill

FedEx  
Tracking  
Number

8079 5216 5318

Form  
ID No.

0200

1 From Please print and press hard.

Date 11-16-15

Sender's FedEx  
Account Number

Sender's  
Name

Phone (505)

Company Univ. of N.M.

Address 915 Camino de Salud NE,

Dept./Floor/Suite/Room

City ABQ

State NM ZIP 87131

2 Your Internal Billing Reference

First 24 characters will appear on invoice.

997647 12761

3 To

Recipient's  
Name

Phone (773)

Company U of So. FL,

Address 12901 Bruce B. Downs Blvd.

We cannot deliver to P.O. boxes or P.O. ZIP codes.

Dept./Floor/Suite/Room

Address

Use this line for the HOLD location address or for continuation of your shipping address.

City Tampa

State FL ZIP 33612

HOLD Weekday  
FedEx location address  
REQUIRED. NOT available for  
FedEx First Overnight.



HOLD Saturday  
FedEx location address  
REQUIRED. Available ONLY for  
FedEx Priority Overnight and  
FedEx 2Day to select locations.



4 Express Package Service

\* To most locations.

NOTE: Service order has changed. Please select carefully.

Next Business Day

☐ FedEx First Overnight

Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected.

☒ FedEx Priority Overnight

Next business morning. \* Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected.

☐ FedEx Standard Overnight

Next business afternoon. \* Saturday Delivery NOT available.

2nd Business Day

☐ FedEx 2Day A.M.

Second business morning. \* Saturday Delivery NOT available.

☐ FedEx 2Day

Second business afternoon. \* Thursday shipments will be delivered on Monday unless SATURDAY Delivery is selected.

☐ FedEx Express Saver

Third business day. \* Saturday Delivery NOT available.

5 Packaging

\* Declared value limit \$500.

☐ FedEx Envelope\*

☐ FedEx Pak\*

☐ FedEx Box

☐ FedEx Tube

☒ Other

6 Special Handling and Delivery Signature Options

☐ SATURDAY Delivery

NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.

☐ No Signature Required

Package may be left without obtaining a signature for delivery.

☐ Direct Signature

Someone at recipient's address may sign for delivery. Fee applies.

☐ Indirect Signature

If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only. Fee applies.

Does this shipment contain dangerous goods?

One box must be checked.

☒ No

☐ Yes

As per attached Shipper's Declaration.

☐ Yes

Shipper's Declaration not required.

☐ Dry Ice

Dry Ice, 5, UN 1845

x kg

☐ Cargo Aircraft Only

7 Payment Bill to:

Enter FedEx Acct. No. or Credit Card No. below.

☒ Sender

Acct. No. in Section I will be billed.

☐ Recipient

☐ Third Party

☐ Credit Card

☐ Cash/Check

FedEx Acct. No.  
Credit Card No.

Exp. Date

Total Packages

Total Weight

Total Declared Value<sup>1</sup>

1

3

lbs.

\$ .00

<sup>1</sup>Your liability is limited to US\$100 unless you declare a higher value. See back for details. By using this Airbill you agree to the service conditions on the back of this Airbill and in the current FedEx Service Guide, including terms that limit our liability.

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Easy new Peel-and-Stick airbill. No pouch needed.  
Apply airbill directly to your package. See directions on back.

644

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UNM03465

# FedEx Express Package US Airbill

FedEx Tracking Number 8088 4715 1305

Form ID No. 0200

11-3-15

## 1 From Please print and press hard.

Date 11-3-15

Sender's FedEx Account Number

1902-6110-7

Sender's Name

Phone 505

Company UNM Dept. of Pediatrics

Address 915 Camino de Salud NE

Dept./Room/Suite/Room

City Albuquerque

State NM

ZIP 87131

## 2 Your Internal Billing Reference

First 24 characters will appear on invoice.

997647

## 3 To

Recipient's Name

Phone 708

Company USF

Address 12901 Bruce B. Downs Blvd

We cannot deliver to P.O. boxes or P.O. ZIP codes.

Dept./Room/Suite/Room

Address

Use this line for the HOLD location address or for continuation of your shipping address.

City Tampa

State FL

ZIP 33612

Hold Weekday  
FedEx location address  
REQUIRED. Not available for  
FedEx First Overnight.

Hold Saturday  
FedEx location address  
REQUIRED. Not available for  
FedEx Priority Overnight and  
FedEx 2Day to select locations.

## 4 Express Package Service

\* To most locations.

Packages up to 150 lbs.  
For packages over 150 lbs., use the  
FedEx Express Freight US Airbill.

### Next Business Day

☐ FedEx First Overnight  
Earliest next business morning delivery to select  
locations. Friday shipments will be delivered on  
Monday unless Saturday Delivery is selected.

☐ FedEx Priority Overnight  
Next business morning.\* Friday shipments will be  
delivered on Monday unless Saturday Delivery  
is selected.

☒ FedEx Standard Overnight  
Next business afternoon.\*  
Saturday Delivery NOT available.

### 2 or 3 Business Days

☐ FedEx 2Day A.M.  
Second business morning.\*  
Saturday Delivery NOT available.

☐ FedEx 2Day  
Second business afternoon.\* Thursday shipments  
will be delivered on Monday unless Saturday  
Delivery is selected.

☐ FedEx Express Saver  
Third business day.\*  
Saturday Delivery NOT available.

## 5 Packaging

\* Declared value limit \$500.

☐ FedEx Envelope\*

☐ FedEx Pak\*

☐ FedEx Box

☐ FedEx Tube

☒ Other

## 6 Special Handling and Delivery Signature Options

Fees may apply. See the FedEx Service Guide.

☐ Saturday Delivery

NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.

☐ No Signature Required

Package may be left without  
obtaining a signature for delivery.

☐ Direct Signature

Someone at recipient's address  
may sign for delivery.

☐ Indirect Signature

If no one is available at recipient's  
address, someone at a neighboring  
address may sign for delivery. For  
residential deliveries only.

Does this shipment contain dangerous goods?

One box must be checked.

☒ No ☐ Yes

As per attached  
Shipper's Declaration.

☐ Yes

Shipper's Declaration  
not required.

☐ Dry Ice

Dry Ice, 9 UN 1845

☐ Cargo Aircraft Only

Restrictions apply for dangerous goods—see the current FedEx Service Guide.

## 7 Payment Bill to:

Enter FedEx Acct. No. or Credit Card No. below.

☒ Sender

Acct. No. in Section  
1 will be billed.

☐ Recipient

☐ Third Party

☐ Credit Card

☐ Cash/Check

FedEx Acct. No.  
Credit Card No.

Exp.  
Date

Total Packages

Total Weight

Total Declared Value<sup>1</sup>

<sup>1</sup>Our liability is limited to US\$100 unless you declare a higher value. See back for details. By using this airbill you agree to our service conditions on the back of this airbill and in the current FedEx Service Guide, including terms that limit our liability.

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Go to fedex.com.

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UNM03466

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**4 Express Package Service** \* To most locations. (NOTE: Service offer has changed. Please select carefully.)

**5 Packaging** \* Declared value limit \$500.

☐ FedEx Envelope\* ☐ FedEx Pak\* ☐ FedEx Box ☐ FedEx Tube ☒ Other

**6 Special Handling and Delivery Signature Options**

☐ SATURDAY Delivery ☐ Not available for FedEx Express Saver.

☐ No Signature Required ☐ Signature Required ☐ Signature Required (Signature may be left without address, signature not required for delivery for residential deliveries only. Fee applies.)

☐ Direct Signature ☐ Indirect Signature

☐ Signature required at recipient's address. May sign for delivery for residential deliveries only. Fee applies.

**7 Payment Bill to:**

☒ Sender ☐ Recipient ☐ Third Party ☐ Cash/Check

Enter FedEx Account No. or Credit Card No. below.

**8 Total Packages** **Total Weight** **Total Declared Value\***

1 lb. \$ 1.00

1 kg. \$ 1.00

**9 Easy new Peel-and-Stick Airbill. No pouch needed.**

Apply airbill directly to your package. See directions on back.

**1 From** Please print and press hard.

**2 External Billing Reference**

**3 To** Recipient's Name

**4 Sender's Name**

**5 Address**

**6 City** **State** **ZIP**

**7 Phone**

**8 Date** **8.24.15**

**9 Sender's FedEx Account Number**

**10 Sender's FedEx Tracking Number**

**11 Sender's FedEx Tracking Number**

**12 Sender's FedEx Tracking Number**

**13 Sender's FedEx Tracking Number**

**14 Sender's FedEx Tracking Number**

**15 Sender's FedEx Tracking Number**

**16 Sender's FedEx Tracking Number**

**17 Sender's FedEx Tracking Number**

**18 Sender's FedEx Tracking Number**

**19 Sender's FedEx Tracking Number**

**20 Sender's FedEx Tracking Number**

**21 Sender's FedEx Tracking Number**

**22 Sender's FedEx Tracking Number**

**23 Sender's FedEx Tracking Number**

**24 Sender's FedEx Tracking Number**

**25 Sender's FedEx Tracking Number**

**26 Sender's FedEx Tracking Number**

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**28 Sender's FedEx Tracking Number**

**29 Sender's FedEx Tracking Number**

**30 Sender's FedEx Tracking Number**

**31 Sender's FedEx Tracking Number**

**32 Sender's FedEx Tracking Number**

**33 Sender's FedEx Tracking Number**

**34 Sender's FedEx Tracking Number**

**35 Sender's FedEx Tracking Number**

**36 Sender's FedEx Tracking Number**

**37 Sender's FedEx Tracking Number**

**38 Sender's FedEx Tracking Number**

**39 Sender's FedEx Tracking Number**

**40 Sender's FedEx Tracking Number**

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**42 Sender's FedEx Tracking Number**

**43 Sender's FedEx Tracking Number**

**44 Sender's FedEx Tracking Number**

**45 Sender's FedEx Tracking Number**

**46 Sender's FedEx Tracking Number**

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**49 Sender's FedEx Tracking Number**

**50 Sender's FedEx Tracking Number**

**51 Sender's FedEx Tracking Number**

**52 Sender's FedEx Tracking Number**

**53 Sender's FedEx Tracking Number**

**54 Sender's FedEx Tracking Number**

**55 Sender's FedEx Tracking Number**

**56 Sender's FedEx Tracking Number**

**57 Sender's FedEx Tracking Number**

**58 Sender's FedEx Tracking Number**

**59 Sender's FedEx Tracking Number**

**60 Sender's FedEx Tracking Number**

**61 Sender's FedEx Tracking Number**

**62 Sender's FedEx Tracking Number**

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**75 Sender's FedEx Tracking Number**

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**78 Sender's FedEx Tracking Number**

**79 Sender's FedEx Tracking Number**

**80 Sender's FedEx Tracking Number**

**81 Sender's FedEx Tracking Number**

**82 Sender's FedEx Tracking Number**

**83 Sender's FedEx Tracking Number**

**84 Sender's FedEx Tracking Number**

**85 Sender's FedEx Tracking Number**

**86 Sender's FedEx Tracking Number**

**87 Sender's FedEx Tracking Number**

**88 Sender's FedEx Tracking Number**

**89 Sender's FedEx Tracking Number**

**90 Sender's FedEx Tracking Number**

**91 Sender's FedEx Tracking Number**

**92 Sender's FedEx Tracking Number**

**93 Sender's FedEx Tracking Number**

**94 Sender's FedEx Tracking Number**

**95 Sender's FedEx Tracking Number**

**96 Sender's FedEx Tracking Number**

**97 Sender's FedEx Tracking Number**

**98 Sender's FedEx Tracking Number**

**99 Sender's FedEx Tracking Number**

**100 Sender's FedEx Tracking Number**



FedEx Tracking Number 8047 8749 3864

Form 10 No.

0200

10/28/15

## 1 From Please print and prefill hard.

Date 10.28.15

Sender's FedEx Account Number

Sender's Name

Phone 505

Company UNM Dep't. of Pediatrics,

Address 915 Camino de Salud NE

Dept./Floor/Suite/Room

City Albuquerque

State NM

ZIP 87131

## 2 Your Internal Billing Reference

First 24 characters will appear on invoice.

997647

## 3 To

Recipient Name

Phone 708

Company USF,

Address 12901 Bruce B Downs Blvd.

We cannot deliver to P.O. boxes or P.O. ZIP codes.

Dept./Floor/Suite/Room

Address

Use this line for the HOLD location address or for continuation of your shipping address.

City Tampa

State FL

ZIP 33612

HOLD Weekday  
FedEx location address  
REQUIRED. NOT available for  
FedEx First Overnight.HOLD Saturday  
FedEx location address  
REQUIRED. Available ONLY for  
FedEx Priority Overnight and  
FedEx 2Day to select locations.

## 4 Express Package Service

\*To meet locations.

NOTE: Service order has changed. Please select carefully.

Packages up to 150 lbs.  
For packages over 150 lbs., use the new  
FedEx Express Freight US Airbill.

## Next Business Day

☐ FedEx First Overnight  
Earliest next business morning delivery to select  
locations. Friday shipments will be delivered on  
Monday unless SATURDAY Delivery is selected.☐ FedEx Priority Overnight  
Next business morning.\* Friday shipments will be  
delivered on Monday unless SATURDAY Delivery  
is selected.☒ FedEx Standard Overnight  
Next business afternoon.\*  
Saturday Delivery NOT available.

## 2nd Business Day

☐ FedEx 2Day A.M.  
Second business morning.\*  
Saturday Delivery NOT available.☐ FedEx 2Day  
Second business afternoon.\* Thursday shipments  
will be delivered on Monday unless SATURDAY  
Delivery is selected.☐ FedEx Express Saver  
Third business day.\*  
Saturday Delivery NOT available.

## 5 Packaging \*Declared value limit \$500.

☐ FedEx Envelope\*☐ FedEx Pak\*☐ FedEx Box☐ FedEx Tube☒ Other

## 6 Special Handling and Delivery Signature Options

☐ SATURDAY Delivery

NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.

☐ No Signature Required  
Package may be left without  
obtaining a signature for delivery.☐ Direct Signature  
Someone at recipient's address  
may sign for delivery. Fee applies.☐ Indirect Signature  
If no one is available at recipient's  
address, someone at a neighboring  
address may sign for delivery. For  
residential deliveries only. Fee applies.

Does this shipment contain dangerous goods?

One box must be checked.

☒ No☐ Yes  
As per attached  
Shipper's Declaration.☐ Yes  
Shipper's Declaration  
not required.☐ Dry Ice  
Dry Ice, E UN 1845Dangerous goods (including dry ice) cannot be shipped in FedEx packaging  
or placed in a FedEx Express Drop Box.☐ Cargo Aircraft Only

## 7 Payment Bill to:

Enter FedEx Acct. No. or Credit Card No. below.

☒ Sender  
Acct. No. in Section  
1 will be billed.☐ Recipient☐ Third Party☐ Credit Card☐ Cash/CheckFedEx Acct. No.  
Credit Card No.Exp.  
Date

Total Pack

s

Total Weight

lbs.

Total Declared Value\*

lbs.

\$

00

\*Our bill  
agrees to  
that \$-m-oad to US\$100 unless you declare a higher value. See back for details. By using this Airbill you  
are conditions on the back of this Airbill and in the current FedEx Service Guide, including terms  
of sale.

Rev. Date

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Easy new Peel and Stick airbill. No pouch needed.  
Apply airbill directly to your package. See directions on back.

CONFIDENTIAL

UNM03468





**1 From** Please print and press hard.

Date **11-17-15** Sender's FedEx Account Number [Redacted]  
 Sender's Name [Redacted] Phone ( **505** ) [Redacted]

Company **University of New Mexico,**  
 Address **915 Camino de Salud NE,** [Redacted]  
 City **Albuquerque** State **NM** ZIP **87131**

**2 Your Internal Billing Reference**

First 24 characters will appear on invoice. **997647**  
**3 To** Recipient's Name [Redacted] Phone ( **713** ) [Redacted]

Company **Univ. of So. FL,** [Redacted]  
 Address **12901 Bruce B Downs Blvd.** [Redacted]  
 We cannot deliver to P.O. boxes or P.O. ZIP codes. Dept./Floor/Suite/Room  
 Address [Redacted]  
 Use this line for the HOLD location address or for continuation of your shipping address.  
 City **Tampa** State **FL** ZIP **33612**

Hold Weekday  
 FedEx location address  
 REQUIRED. Not available for  
 FedEx First Overnight.  
 Hold Saturday  
 FedEx location address  
 REQUIRED. Not available for  
 FedEx Priority Overnight and  
 FedEx 2Day to select locations.

**4 Express Package Service** \* To most locations.

Packages up to 150 lbs.

**Next Business Day**

- ☐ FedEx First Overnight  
 Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.  
☐ FedEx Priority Overnight  
 Next business morning. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.  
☒ FedEx Standard Overnight  
 Next business afternoon. Saturday Delivery NOT available.

**2 or 3 Business Days**

- ☐ FedEx 2Day A.M.  
 Second business morning. Saturday Delivery NOT available.  
☐ FedEx 2Day  
 Second business afternoon. Thursday shipments will be delivered on Monday unless Saturday Delivery is selected.  
☐ FedEx Express Saver  
 Third business day. Saturday Delivery NOT available.

**5 Packaging** \* Declared value limit \$500.

- ☐ FedEx Envelope\* ☐ FedEx Pak\* ☐ FedEx Box ☐ FedEx Tube ☒ Other

**6 Special Handling and Delivery Signature Options** Fees may apply. See the FedEx Service Guide.

- ☐ Saturday Delivery  
 (Not available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.)  
☐ No Signature Required  
 Package may be left without obtaining a signature for delivery.  
☐ Direct Signature  
 Someone at recipient's address may sign for delivery.  
☐ Indirect Signature  
 If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only.

**Does this shipment contain dangerous goods?**

- One box must be checked.  
☒ No ☐ Yes As per attached Shipper's Declaration. ☐ Yes Shipper's Declaration not required. ☐ Dry Ice Dry Ice, 9 UN 1845 x kg  
 Restrictions apply for dangerous goods — see the current FedEx Service Guide. ☐ Cargo Aircraft Only

**7 Payment Bill to:**

- Enter FedEx Acct. No. or Credit Card No. below.  
☒ Sender Acct. No. in Section I will be billed. ☐ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check  
 FedEx Acct. No. Credit Card No. Exp. Date

Total Packages Total Weight Total Declared Value†

1 lbs. \$ .00  
 †Your liability is limited to US\$100 unless you declare a higher value. See back for details. By using this airbill you agree to the service conditions on the back of this airbill and in the current FedEx Service Guide, including terms that limit our liability.  
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**644**



Leave the packing to the pros at FedEx Office.  
 Go to [fedex.com/office](http://fedex.com/office).

**FedEx**  
Express

 Package  
US Airbill

 FedEx  
Tracking  
Number

8058 4715 1280

 Form  
ID No. 0200

**1 From** Please print and press hard.

Date 11.18.15

 Sender's FedEx  
Account Number

 Sender's  
Name

Phone (505)

Company University of N.M.

Address 915 Camino de Salud NE,

Dept./Floor/Suite/Room

City Albuquerque

State NM ZIP 87131

**2 Your Internal Billing Reference**

First 24 characters will appear on invoice.

997647

**3 To**

 Recipient's  
Name

Phone (773)

Company Univ. of So. FL

Address 12901 Bruce B Downs Blvd

We cannot deliver to P.O. boxes or P.O. ZIP codes.

Dept./Floor/Suite/Room

Address

Use this line for the HOLD location address or for continuation of your shipping address.

City Tampa

State FL ZIP 33612

 Hold Weekday  
FedEx location address  
REQUIRED. NOT available for  
FedEx First Overnight.

 Hold Saturday  
FedEx location address  
REQUIRED. Available ONLY for  
FedEx Priority Overnight and  
FedEx 2Day to select locations.

**4 Express Package Service**

\* To most locations.

 Packages up to 150  
For packages over 150 lbs., use  
FedEx Express Freight US A

**Next Business Day**
☐ FedEx First Overnight  
Earliest next business morning delivery to select  
locations. Friday shipments will be delivered on  
Monday unless Saturday Delivery is selected.

☐ FedEx Priority Overnight  
Next business morning. \* Friday shipments will be  
delivered on Monday unless Saturday Delivery  
is selected.

☒ FedEx Standard Overnight  
Next business afternoon.  
Saturday Delivery NOT available.

**2 or 3 Business Days**
☐ FedEx 2Day A.M.  
Second business morning. \*  
Saturday Delivery NOT available.

☐ FedEx 2Day  
Second business afternoon. \* Thursday shipments  
will be delivered on Monday unless Saturday  
Delivery is selected.

☐ FedEx Express Saver  
Third business day. \*  
Saturday Delivery NOT available.

**5 Packaging**

\* Declared value limit \$500.

☐ FedEx Envelope\*

☐ FedEx Pak\*

☐ FedEx  
Box

☐ FedEx  
Tube

☒ C

**6 Special Handling and Delivery Signature Options**

Fees may apply. See the FedEx Service

☐ Saturday Delivery

NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.

☐ No Signature Required

 Package may be left without  
obtaining a signature for delivery.

☐ Direct Signature

 Someone at recipient's address  
may sign for delivery.

☐ Indirect Signature  
If no one is available at recipient  
address, someone at neighbor  
address may sign for delivery. For  
residential deliveries only.

**Does this shipment contain dangerous goods?**

One box must be checked.

☒ No

☐ Yes

 As per attached  
Shipper's Declaration.

☐ Yes

 Shipper's Declaration  
not required.

☐ Dry Ice

Dry Ice, 9 UN 1845

☐ Cargo Aircraft Only

Restrictions apply for dangerous goods—see the current FedEx Service Guide.

**7 Payment Bill to:**

Enter FedEx Acct. No. or Credit Card No. below.

☒ Sender  
Acct. No. in Section  
I will be billed.

☐ Recipient

☐ Third Party

☐ Credit Card

☐ Cash/C

 Exp.  
Date

Total Packages

Total Weight

Total Declared Value\*

 \*Our liability is limited to US\$100 unless you declare a higher value. See back for details. By using this airbill you  
agree to the service conditions on the back of this airbill and in the current FedEx Service Guide, including terms  
that limit our liability.

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UNM03471





Package  
US Airbill

FedEx Tracking Number 8088 4715 1279

Form 10 No. 0200

1 From Please print and press hard.

Date 11-20-15

Sender's FedEx Account Number

Sender's Name

Phone (505)

Company

University of N.M.

Address

915 Camino de Salud NE,

City

Albuquerque

State

NM

ZIP

87131

2 Your Internal Billing Reference

First 24 characters will appear on invoice.

997647 2051+per

3 To

Recipient's Name

Phone (773)

Company

(U. So. FL) FedEx 800-463-3339

Address

5101 W. Waters Ave.

We cannot deliver to P.O. boxes or P.O. ZIP codes.

Dept./Floor/Suite/Room

Address

Use this line for the HOLD location address or for continuation of your shipping address.

City

Tampa

State

FL

ZIP

33634

Hold Weekday  
FedEx location address  
REQUIRED. NOT available for  
FedEx First Overnight.

Hold Saturday  
FedEx location address  
REQUIRED. AVAILABLE ONLY for  
FedEx Priority Overnight and  
FedEx 2Day to select locations.

4 Express Package Service

\* To most locations.

Packages up to 150 lbs.  
For packages over 150 lbs., use the  
FedEx Express Freight US Airbill.

Next Business Day

☐ FedEx First Overnight  
Earliest next business morning delivery to select  
locations. Friday shipments will be delivered on  
Monday unless Saturday Delivery is selected.

☒ FedEx Priority Overnight  
Next business morning.\* Friday shipments will be  
delivered on Monday unless Saturday Delivery  
is selected.

☐ FedEx Standard Overnight  
Next business afternoon.\*  
Saturday Delivery NOT available.

2 or 3 Business Days

☐ FedEx 2Day A.M.  
Second business morning.\*  
Saturday Delivery NOT available.

☐ FedEx 2Day  
Second business afternoon.\* Thursday shipments  
will be delivered on Monday unless Saturday  
Delivery is selected.

☐ FedEx Express Saver  
Third business day.\*  
Saturday Delivery NOT available.

5 Packaging

\* Declared value limit \$500.

☐ FedEx Envelope\*

☐ FedEx Pak\*

☐ FedEx Box

☐ FedEx Tube

☐ Other

6 Special Handling and Delivery Signature Options

Fees may apply. See the FedEx Service Guide.

☒ Saturday Delivery

NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.

☐ No Signature Required  
Package may be left without  
obtaining a signature for delivery.

☐ Direct Signature  
Someone at recipient's address  
may sign for delivery.

☐ Indirect Signature  
If no one is available at recipient's  
address, someone at a neighboring  
address may sign for delivery. For  
residential deliveries only.

Does this shipment contain dangerous goods?

One box must be checked.

☒ No

☐ Yes  
As per attached  
Shipper's Declaration.

☐ Yes  
Shipper's Declaration  
not required.

☐ Dry Ice  
Dry Ice, 5 UN 1845 \_\_\_\_\_ x \_\_\_\_\_ kg

Restrictions apply for dangerous goods—see the current FedEx Service Guide.

☐ Cargo Aircraft Only

7 Payment Bill to:

Enter FedEx Acct. No. or Credit Card No. below.

☒ Sender  
Acct. No. in Section  
1 will be billed.

☐ Recipient

☐ Third Party

☐ Credit Card

☐ Cash/Check

Total Packages

Total Weight

Total Declared Value<sup>1</sup>

lbs. \$ .00

<sup>1</sup>Our liability is limited to US\$100 unless you declare a higher value. See back for details. By using this airbill you agree to the service conditions on the back of this airbill and in the current FedEx Service Guide, including terms and conditions.

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CONFIDENTIAL

UNM03472



Package  
US Airbill

FedEx Tracking Number 8088 4715 1268

Form 10 No. 0200

1 From Please print and press hard.

Date 11-24-15

Sender's FedEx Account Number

Sender's Name

Phone (505)

Company Univ. of N.M.

Address 915 Camino de Salud NE

Dept./Floor/Suite/Room

City Albuquerque

State NM

ZIP 87131

2 Your Internal Billing Reference

First 24 characters will appear on invoice.

997647 156 61

3 To

Recipient's Name

Phone (773)

Company U. of So. FL

Address 12901 Bruce B. Downs Blvd

We cannot deliver to P.O. boxes or P.O. ZIP codes.

Dept./Floor/Suite/Room

Address

Use this line for the HOLD location address or for confirmation of your shipping address.

City Tampa

State FL

ZIP 33612



Ship it. Track it. Pay for it. All online.  
Go to [fedex.com](http://fedex.com)

4 Express Package Service

\* To most locations.

Packages up to 150 lbs.  
For packages over 150 lbs., use the  
FedEx Express Freight US Airbill.

Next Business Day

☐ FedEx First Overnight  
Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.

☐ FedEx Priority Overnight  
Next business morning.\* Friday shipments will be delivered on Monday unless Saturday Delivery is selected.

☒ FedEx Standard Overnight  
Next business afternoon.\*  
Saturday Delivery NOT available.

2 or 3 Business Days

☐ FedEx 2Day A.M.  
Second business morning.\*  
Saturday Delivery NOT available.

☐ FedEx 2Day  
Second business afternoon.\* Thursday shipments will be delivered on Monday unless Saturday Delivery is selected.

☐ FedEx Express Saver  
Third business day.\*  
Saturday Delivery NOT available.

5 Packaging \*Declared value limit \$500.

☐ FedEx Envelope\*

☐ FedEx Pak\*

☐ FedEx Box

☐ FedEx Tube

☒ Other

6 Special Handling and Delivery Signature Options

Fees may apply. See the FedEx Service Guide.

☐ Saturday Delivery

NOT AVAILABLE for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.

☒ No Signature Required  
Package may be left without obtaining a signature for delivery.

☐ Direct Signature  
Someone at recipient's address may sign for delivery.

☐ Indirect Signature  
If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only.

Does this shipment contain dangerous goods?

One box must be checked.

☒ No ☐ Yes  
As per attached Shipper's Declaration.

☐ Yes  
Shipper's Declaration not required.

☐ Dry Ice  
Dry Ice, 9, UN 1845

☐ Cargo Aircraft Only

Restrictions apply for dangerous goods—see the current FedEx Service Guide.

7 Payment Bill to:

Enter FedEx Acct. No. or Credit Card No. below.

☒ Sender  
Acct. No. in Section 1 will be billed.

☐ Recipient

☐ Third Party

☐ Credit Card

☐ Cash/Check

Total Packages

Total Weight

Total Declared Value\*

\*Our liability is limited to US\$100 unless you declare a higher value. See back for details. By using this airbill you agree to the service conditions on the back of this airbill and in the current FedEx Service Guide, including terms that limit our liability.

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644

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UNM03473

1. Sender:

[REDACTED]

University of New Mexico

915 Camino de Salud NE, [REDACTED]

Albuquerque, NM 87131 USA

2. Internal Billing Reference: 997647

3. Recipient:

[REDACTED]

University of South Florida, MDC 4011

12901 Bruce B. Downs Blvd.

Tampa, FL 33612

~~"Samples" Harmonized Code: 300190 Value: \$500 USD~~

4. FedEx Priority Overnight

5. Other

6. No dangerous goods

7. Bill to: Sender's FedEx #: [REDACTED]

Please email tracking # to:

1. [REDACTED]
2. [REDACTED]
3. [REDACTED]
4. [REDACTED]
5. [REDACTED]

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UNM03474







# Expanded Service International Air Waybill

For FedEx services worldwide including express freight services,  
dangerous goods, broker select, and letter of credit.

**1 From** Please print and press hard.  
Date 3/23/16 Sender's FedEx Account Number [REDACTED]  
Sender's Name [REDACTED] Phone 505-[REDACTED]  
Company U. of New Mexico  
Address 915 Camino de Salud NE  
Address [REDACTED]  
City Albuquerque State NM  
Country USA ZIP Postal Code 87131

**2 To**  
Recipient's Name [REDACTED] Phone 613-[REDACTED]  
Company Ottawa Hospital Research Institute  
Address Critical Care Wing, 6th Floor, [REDACTED]  
Address 501 Smyth Road  
City Ottawa State ON  
Country CAN ZIP Postal Code K1H 8L6

Recipient's Tax ID Number for Customs Purposes  
e.g., GST/REG/VAT/IN/ABN, or as locally required.

### 3 Shipment Information

Total Packages 1 Total Weight 4.5 ☒ lbs. ☐ kg DIM 12 110 110 ☒ in. ☐ cm  
Shipper's Load and Count/SLAC 1

| Commodity Description | Harmonized Code | Country of Manufacture | Value for Customs |
|-----------------------|-----------------|------------------------|-------------------|
| <u>lung tissue</u>    | <u>300190</u>   | <u>USA</u>             | <u>200 USD</u>    |
|                       |                 |                        |                   |
|                       |                 |                        |                   |
|                       |                 |                        |                   |
|                       |                 |                        |                   |
|                       |                 |                        |                   |
|                       |                 |                        |                   |
|                       |                 |                        |                   |
|                       |                 |                        |                   |
|                       |                 |                        |                   |

Has EEI been filed in AES? For U.S. Export Only: Check One  
☐ No EEI required, value \$2,500 or less per Schedule B Number, no license required (NLR), not subject to ITAR.  
☐ No EEI required, enter exemption number:   If other than NLR, enter License Exemption:    
☐ Yes - Enter AES proof of filing citation:  

Total Declared Value for Carriage   Total Value for Customs (Specify Currency) 200 USD

For Completion Instructions, see back of fifth page.

**Questions?**  
Go to our Web site at [fedex.com](http://fedex.com).  
or  
In the U.S., call 1.800.GoFedEx 1.800.463.3339.  
Outside the U.S., call your local FedEx office.

The terms and conditions of service may vary from country to country. Consult our local office for specific information.  
Non-Negotiable International Air Waybill • ©1994-2008 FedEx

## The World On Time.

Not all services and options are available to all destinations.

**4a Express Package Service** Packages up to 150 lbs. / 68 kg  
☒ FedEx Intl. Priority ☐ FedEx Intl. First Available to select locations. ☐ FedEx Intl. Economy FedEx Envelope and FedEx Pak rate not available.

**4b Express Freight Service** Packages over 150 lbs. / 68 kg  
☐ FedEx Intl. Priority Freight ☐ FedEx Intl. Economy Freight  
Booking Number REQUIRED  
Please call your local FedEx office to book shipments.

**5 Packaging** \*These unique brown boxes with special pricing are provided by FedEx for FedEx Intl. Priority only.  
☐ FedEx Envelope ☐ FedEx Pak ☐ FedEx Box ☐ FedEx Tube  
☒ Other ☐ FedEx 10kg Box\* ☐ FedEx 25kg Box\*

**6a Special Handling**  
☐ HOLD at FedEx Location ☐ SATURDAY Delivery Available to select locations for FedEx Intl. Priority and FedEx Intl. Priority Freight only.  
Does this shipment contain dangerous goods? ☒ No ☐ Yes As per attached Shipper's Declaration. ☐ Yes Shipper's Declaration not required. ☐ Dry Ice Dry Ice, 9, UN 1845 ☐ Cargo Aircraft Only  
Dangerous goods (including dry ice) cannot be shipped in FedEx packaging or placed in a FedEx Express Drop Box.

**6b Broker Selection** Not available with FedEx Intl. First. ☐ Intl. Broker Select To specify a broker other than FedEx.  
Broker's Name    
City / State / Province / Country    
ZIP / Postal Code   Phone  

**7 Payment** Complete payment options for both transportation charges and duties and taxes.  
Bill transportation charges to:  
☐ Sender Acct. No. in Section I will be billed. ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash Check/ Cheque FedEx Use Only  
FedEx Acct. No. 123626583  
Credit Card No.    
Credit Card Exp. Date  

Bill duties and taxes to: ALL shipments may be subject to Customs charges, which FedEx does not estimate prior to clearance.  
☐ Sender Acct. No. in Section I will be billed. ☒ Recipient ☐ Third Party  
FedEx Acct. No. 123 626 583

**8 Your Internal Billing Reference** First 24 characters will appear on invoice.  
19 WKPTUNAL

**9 Required Signature**  
Use of this Air Waybill constitutes your agreement to the Conditions of Contract on the back of this Air Waybill, and you represent that this shipment does not require a U.S. State Department license. Certain international treaties, including the Warsaw Convention, may apply to this shipment and limit our liability for damage, loss, or delay, as described in the Conditions of Contract.  
WARNING: These commodities, technology, or software were exported from the United States in accordance with Export Administration regulations. Diversion contrary to U.S. law prohibited.  
Sender's Signature: [REDACTED]  
This is not authorized for FedEx  
FedEx Courier Receipt:   Date:    
For letter of credit shipments only.



FedEx Tracking Number

8000 9390 5061

Form ID No. 0425

569

PART 158412 • Rev. Date 11/03  
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1501 RENAISSANCE BLVD  
Albuquerque, NM 87107

Location: ABQA  
Device ID: ABQA-POS2  
Employee: 5042520  
Transaction: 870188547890

**INTL PRIORITY**

800093905061 4.50 lb (M) 175.40  
Total Declared Value 200

Shipment subtotal: 175.40

Total Due: 175.40

FedEx Account: 175.40

\*\*\*\*

M = Weight entered manually  
S = Weight read from scale  
T = Taxable item

Subject to additional charges. See FedEx Service Guide  
at [fedex.com](http://fedex.com) for details. All merchandise sales final.

Visit us at: [fedex.com](http://fedex.com)  
Or call 1.800.GoFedEx  
1.800.463.3339

March 23, 2016 6:33:34 PM

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UNM03478

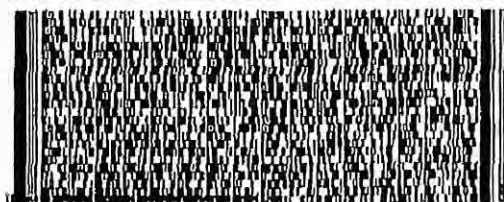
16.3 10g

ORIGIN ID: ONMA (505) 899-8298  
UNM  
815 CAMINO DE SALUD NE, BR 136  
UNIV OF NEW MEXICO, NM 87131 US  
SIGN: [REDACTED]

SHIP DATE: 17DEC15  
ACTWT: 8.40 LB  
CAP: 008995205/SSFE1621  
DIMS: 15x12x13 IN  
BILL RECIPIENT  
NO REF 35.34

Part of 155037-425 H7708/14

TO [REDACTED]  
**OTTAWA HOSPITAL RESEARCH INSTITUTE**  
**501 SMYTH RD**  
**CRITICAL CARE WING 6TH FLOOR W6137**  
**OTTAWA ON K1H8L6 (CA)**  
(813) 737-8899 REF: REP1:



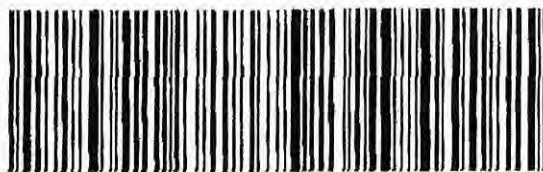
Do not use this label for international shipments. For international shipments, use the appropriate international label. Registration: Copyright 1997 by US Mail in print & color.

TRK# 7819 8681 4917  
0430

AM  
INTL PRIORITY

**XQ YOWA**

K1H 8L6  
ON-CA YOW



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UNM03479



ORIGIN ID:DNMA (SOS) 999-8296  
UNM  
915 CAMINO DE SALUD NE, BRF 136  
Univ of new mexico, NM 87131  
UNITED STATES, US

Ship Date: 17DEC15  
ActWgt: 8.40 LB  
CAO: 006995205/SSFE1621  
Dims: 15x12x13 IN  
EIN/VAT:

Part # 156297-455

10

(613) 737-8888

OTTAWA HOSPITAL RESEARCH INSTITUTE  
501 SMYTH RD  
CRITICAL CARE WING 6TH FLOOR W6137  
Ottawa, ON K1H8L6

**FedEx**  
Express

(CA)

AWB



**XQ YOWA**

PKG TYPE: CUSTOMER

TRK# 7819 8681 4917

Form  
0430

### INTL PRIORITY

REF:  
DESC1: ANY MARKED OR MUTILATED ARTICLE OR STRIP CUT FROM FABRIC FOI  
DESC2:  
DESC3:  
DESC4:  
EET: NO EE1 30.36

COUNTRY MFG: US  
CARRIAGE VALUE: 500.00 USD  
CUSTOMS VALUE: 500.00 USD

SIGN: [REDACTED]  
T/C: R 123626593  
D/T: R

These commodities, technology, or software were exported from the United States in accordance with the export administration regulations. Diversion contrary to US law is prohibited.

The Montreal or Warsaw Convention may apply and will govern and in most cases limit the liability of Federal Express for loss or delay of or damage to your shipment. Subject to the conditions of the contract on the reverse.

**ORIGIN AWB COPY — PLEASE PLACE IN POUCH**

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UNM03480



130 Thad Johnson Rd.  
Ottawa, Ont. K1V6X1

**Attention Broker**

Please note that AWE 7819 8681.4917 arrived in our warehouse without any customs documentation. Memorandum D17-4-0 appendix B, clause 5 indicates that under the LVS Program the courier is required to make every possible effort to provide brokers with supporting documentation or the shipment declaration provided by the shipper. Please be advised that we have provided you with all information that was received from the shipper. Please communicate with the importer of record to determine any additional specifics with regards to this shipment.

Sincerely,

**FedEx Express Ottawa**  
**Import Representatives.**

NOTES: This communication is intended only for the use of the individual or entity named above. If you are not the intended recipient, you are notified that any use, dissemination or distribution of this communication is strictly prohibited. If you have received this communication in error, please notify the sender immediately by return mail.

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UNM03481

# Commercial Invoice

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1 Shipper/Exporter</b><br>Tax ID No. <span style="float:right">OPTIONAL</span><br>Contact Name <span style="background-color: black; color: black;">[REDACTED]</span><br>Contact Phone 505- <span style="background-color: black; color: black;">[REDACTED]</span><br>Email <span style="background-color: black; color: black;">[REDACTED]</span><br>Company Name U. of New Mexico<br>Address 1 915 Camino de Salud NE<br>Address 2 <span style="background-color: black; color: black;">[REDACTED]</span><br>City ABQ State NM ZIP 87131<br>Country USA                                                                                                                          | <b>3 Ship Date</b> 12-17-15<br><b>4 Air Waybill No./Tracking No./Bill of Lading</b><br><input checked="" type="checkbox"/> FedEx Express International Air Waybill Tracking No(s).<br>7819 8681 4917<br><br><input type="checkbox"/> FedEx International Ground® Tracking No(s).<br><br><b>5 Reference No.</b><br>(e.g., purchase order, invoice no.) 16.3 <span style="float:right">OPTIONAL</span><br><b>6 Purpose of Shipment</b> research                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| <b>2 Parties to Transactions:</b> <input type="checkbox"/> Related or <input checked="" type="checkbox"/> Non-related                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <b>7 Recipient</b><br>Tax ID No. <span style="float:right">OPTIONAL</span><br>Contact Name <span style="background-color: black; color: black;">[REDACTED]</span><br>Contact Phone 613- <span style="background-color: black; color: black;">[REDACTED]</span> <span style="background-color: black; color: black;">[REDACTED]</span><br>Email <span style="background-color: black; color: black;">[REDACTED]</span><br>Company Name Ottawa Hospital Research Institute<br>Address 1 Critical Care Wing, 6th Floor, <span style="background-color: black; color: black;">[REDACTED]</span><br>Address 2 501 Smyth Road<br>City Ottawa Province ON Postal Code K1H 8L6<br>Country CAN | <b>8 Importer - if other than recipient</b><br><input checked="" type="checkbox"/> Same as RECIPIENT<br>Tax ID No. <span style="float:right">OPTIONAL</span><br>Contact Name <span style="background-color: black; color: black;">[REDACTED]</span><br>Contact Phone <span style="background-color: black; color: black;">[REDACTED]</span><br>Company Name <span style="background-color: black; color: black;">[REDACTED]</span><br>Address 1 <span style="background-color: black; color: black;">[REDACTED]</span><br>Address 2 <span style="background-color: black; color: black;">[REDACTED]</span><br>City <span style="background-color: black; color: black;">[REDACTED]</span> Province <span style="background-color: black; color: black;">[REDACTED]</span> Postal Code <span style="background-color: black; color: black;">[REDACTED]</span><br>Country <span style="background-color: black; color: black;">[REDACTED]</span> |

## 9 Broker Information

FedEx Express® shipments will be cleared by our in-house broker. If you wish to designate your own broker for this express shipment, please provide contact information in the Broker Selection section of the FedEx® Expanded Service International Air Waybill.

FedEx International Ground shipments will be cleared by our in-house broker. The shipper is responsible for clearance entry fees. The importer will be billed for duties and taxes and other surcharges, unless they are charged to an authorized FedEx account number.

10 For FedEx Ground only.

Duties and taxes payable by: ☐ Shipper ☐ Recipient ☐ Other If other, please provide FedEx Account Number

| 11 | No. of Pkgs | 12 | No. of Units | 13 | Unit of Measure | 14 | Description of Goods | 15                   | Harmonized Code    | 16 | Country of Origin | 17 | Unit Value | 18 | Total Value |          |  |  |  |  |  |  |  |    |  |  |  |  |  |  |  |                                     |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |    |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|----|-------------|----|--------------|----|-----------------|----|----------------------|----------------------|--------------------|----|-------------------|----|------------|----|-------------|----------|--|--|--|--|--|--|--|----|--|--|--|--|--|--|--|-------------------------------------|--|--|--|--|--|--|--|----------|--|--|--|--|--|--|--|-----------|--|--|--|--|--|--|--|----------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----------|--|--|--|--|--|--|--|---------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----------|--|--|--|--|--|--|--|----------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----------|--|--|--|--|--|--|--|-------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|--|--|--|--|--|--|--|---------------|--|--|--|--|--|--|--|---------|--|--|--|--|--|--|--|----|--|--|--|--|--|--|--|---------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
|    | 1           |    | 10           |    | g               |    | Lung tissue          |                      | OPTIONAL<br>300190 |    | USA               |    | 50 USD     |    | 500 USD     |          |  |  |  |  |  |  |  |    |  |  |  |  |  |  |  |                                     |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |    |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|    |             |    |              |    |                 |    |                      |                      |                    |    |                   |    |            |    |             |          |  |  |  |  |  |  |  |    |  |  |  |  |  |  |  |                                     |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |    |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|    |             |    |              |    |                 |    |                      |                      |                    |    |                   |    |            |    |             |          |  |  |  |  |  |  |  |    |  |  |  |  |  |  |  |                                     |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |    |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 19 |             |    |              |    |                 |    |                      | Total Pkgs           |                    |    |                   |    |            |    |             | 1        |  |  |  |  |  |  |  | 20 |  |  |  |  |  |  |  | Total Weight (Indicate lbs., or kg) |  |  |  |  |  |  |  | 8.4 lb   |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  | Subtotal |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |    |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 21 |             |    |              |    |                 |    |                      | Terms of Sale        |                    |    |                   |    |            |    |             | OPTIONAL |  |  |  |  |  |  |  |    |  |  |  |  |  |  |  |                                     |  |  |  |  |  |  |  | OPTIONAL |  |  |  |  |  |  |  | Insurance |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |    |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 22 |             |    |              |    |                 |    |                      | Special Instructions |                    |    |                   |    |            |    |             | OPTIONAL |  |  |  |  |  |  |  |    |  |  |  |  |  |  |  |                                     |  |  |  |  |  |  |  | OPTIONAL |  |  |  |  |  |  |  | Freight   |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | OPTIONAL |  |  |  |  |  |  |  | Packing |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | OPTIONAL |  |  |  |  |  |  |  | Handling |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | OPTIONAL |  |  |  |  |  |  |  | Other |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 23 |  |  |  |  |  |  |  | Invoice Total |  |  |  |  |  |  |  | 500 USD |  |  |  |  |  |  |  | 24 |  |  |  |  |  |  |  | Currency Code |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

25 These commodities, technology, or software were exported from the United States in accordance with Export Administration regulations. Diversion contrary to U.S. law prohibited.

I declare all the information contained in this invoice to be true and correct.

Signature and Title of Authorized Person [REDACTED]

Date

12-17-15

M-1054 REV 7/10 Part 116547 RRD

CONFIDENTIAL

0002769PM

UNM03482



Address: 3720 SPIRIT DRIVE S E  
ALBUQUERQUE  
NM 87106  
Location: ABQR  
Device ID: -BTC02

Sender Address:

UNM  
915 CAMINO DE SALUD NE,  
Univ of new mexico, NM 87131  
505

Recipient Address:

OTTAWA HOSPITAL RESEARCH INSTITUTE  
501 SMYTH RD  
CRITICAL CARE WING 6TH FLOOR  
Ottawa, ON K1H8L6  
613

Commodities:  
SAMPLES

Bill Duties/Taxes:  
RECIPIENT

Package Information:  
YOUR PACKAGING  
15 x 12 x 13

Payment Type:  
RECIPIENT

Total Declared Value:  
500

Total Declared Value for Customs:  
500.00

FedEx International Priority  
8.4 LB (S) \*\*\*



Address: 3720 SPIRIT DRIVE S E  
ALBUQUERQUE  
NM 87106  
Location: ABQR  
Device ID: -BTC02  
Transaction: 860125638598

FedEx International Priority  
781986814917 8.4 LB (S) \*\*\*  
Declared Value 500

FedEx Recipient Account  
\*\*\*\*

M = Weight entered manually  
S = Weight read from scale  
T = Taxable item

Terms and Conditions apply. See  
[fedex.com/us/service-guide](http://fedex.com/us/service-guide) for details.

Visit us at: [fedex.com](http://fedex.com)  
Or call 1.800.GoFedEx  
1.800.463.3339

December 17, 2015 5:45:21 PM

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UNM03483



# International Air Waybill

For FedEx services worldwide.

121715/1200

Please print and press hard.  
Date 12/15/15 Sender's FedEx Account Number SCEDEN FED EX ACCOUNT NUMBER 801

Sender's Name [Redacted] Phone 505-[Redacted]

Company University of New Mexico

Address 915 Camino de Salud NE

Address [Redacted]

City Albuquerque State Province NM

Country USA ZIP Postal Code 87131

2 To Recipient's Name PO# OHRIT 25338 Phone 613-[Redacted]

Company Ottawa Hospital Research Institute

Address Critical Care Wing, 6th Floor, [Redacted] Dept/Floor [Redacted]

Address 501 Smyth Road

City Ottawa State Province ON

Country CANADA ZIP Postal Code K1H 8L6

Recipient's Tax ID Number for Customs Purposes  
e.g., GST#VAT#NEN#ABN, or as locally required.

3 Shipment Information ☐ For EU Only: Tick here if goods are not in free circulation and provide C.I.

Total Packages 1 Total Weight 7 lbs 0 kg 0 DIM 13 13 11 in 0 cm

| Commodity Description | Harmonized Code | Country of Manufacture | Value for Customs |
|-----------------------|-----------------|------------------------|-------------------|
| <u>Lung tissue</u>    | <u>300190</u>   | <u>USA</u>             | <u>500</u>        |
|                       |                 |                        |                   |
|                       |                 |                        |                   |

Has EEI been filed in AES? ☐ No EEI required, value \$2500 or less per Sch. B Number, no license required (NLR), not subject to ITAR. ☐ Yes - Enter AES proof of filing citation: 500 USD

## 4 Express Package Service

☐ FedEx Intl. Priority ☐ FedEx Intl. First Available to select locations.  
☐ ☐ FedEx Intl. Economy FedEx Envelope and FedEx Pak rate not available.

Packages up to 150 lbs./68 kg  
For packages over 150 lbs. (68 kg), use the  
FedEx Expanded Service Int'l. Air Waybill.

Not all service options are available to all destinations. Dangerous goods may be shipped via Air Waybill.

## 5 Packaging

☐ FedEx Envelope ☐ FedEx Pak ☐ FedEx Box ☐ FedEx Tube  
☒ Other ☐ FedEx 10kg Box\* ☐ FedEx 25kg Box\*

\*These unique brown boxes with special pricing are provided by FedEx for FedEx Intl. Priority only.

## 6 Special Handling

☐ HOLD at FedEx Location ☐ SATURDAY Delivery Available to select locations for FedEx Intl. Priority only.

## 7 Payment

Bill transportation charges to:

Complete payment options for both transportation charges and duties and taxes.

Enter FedEx Acct. No. or Credit Card No. below.  
☐ Sender Acct. No. in Section 1 will be billed. ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash Check/Cheque FedEx Use Only

FedEx Acct. No. [Redacted] Credit Card No. [Redacted]

Credit Card Exp. Date [Redacted]

Bill duties and taxes to:

ALL shipments may be subject to Customs charges, which FedEx does not estimate prior to clearance.

Enter FedEx Acct. No. below.  
☐ Sender Acct. No. in Section 1 will be billed. ☒ Recipient ☐ Third Party

FedEx Acct. No. [Redacted]

## 8 Your Internal Billing Reference

First 24 characters will appear on invoice.

121715WK1

## 9 Required Signature

Use of this Air Waybill constitutes your agreement to the Conditions of Contract on the back of this Air Waybill, and you represent that this shipment does not require a U.S. State Department License or contain dangerous goods. Certain international treaties, including the Warsaw Convention, may apply to this shipment and limit our liability for damage, loss, or delay, as described in the Conditions of Contract. WARNING: These commodities, technology, or software were exported from the United States in accordance with Export Administration Regulations. Diversion contrary to U.S. law prohibited.

Sender's Signature: [Redacted]

This is not authorized.

For Completion Instructions, see back of fifth page.

FedEx Tracking Number

8754 7931 6241

Form ID No.

568

PART 1581/D  
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PRINTED IN U.S.

041



Ship and track packages at [fedex.com](http://fedex.com)

The terms and conditions of service may vary from country to country. Consult our local office for specific information. Non-Negotiable International Air Waybill - ©1994-2003 FedEx

Questions? Go to our Web site at [fedex.com](http://fedex.com).

Or in the U.S., call 1.800.GoFedEx 1.800.463.3339. Outside the U.S., call your local FedEx office.

Subject to additional charges. See FedEx Service Guide at [fedex.com](http://fedex.com) for details. All merchandise sales final.

December 16, 2015 5:18:01 PM

Visit us at: [fedex.com](http://fedex.com)  
Or call 1.800.GoFedEx  
1.800.463.3339

H = Weight entered manually  
S = Weight read from scale  
T = Taxable item

\*\*\* See payer invoice

Bill To Recipient/Third Party

INTL PRIORITY  
875479316241 6.75 lb (S)

\*\*\*

Location: ABOR  
Device ID: ABOR-PDS2  
Employee: 632033  
Transaction: 860165973626

3720 SPIRIT DRIVE S E  
ALBUQUERQUE, NM 87106

FedEx

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UNM03484





## Expanded Service International Air Waybill

For FedEx services worldwide including express freight services,  
dangerous goods, broker select, and letter of credit.

### 1 From Please print and press hard.

Date 02/13/2013 Sender's FedEx Account Number [REDACTED]  
Sender's Name [REDACTED] Phone 505. [REDACTED]  
Company UNM  
Address [REDACTED]  
Address 915 Camino de Salud NE  
City Albuquerque State NM  
Country USA ZIP Postal Code 87131

2 To Recipient's Name [REDACTED] Phone 788- [REDACTED]  
Company U of Alberta Speed code PD 122  
Address 3-032 Katz  
Address [REDACTED]  
City Edmonton State AB  
Country CAN ZIP Postal Code T6G 2S2  
Recipient's Tax ID Number for Customs Purposes  
e.g. GST/RFC/VAT/IN/EIN/ABN, or as locally required.

### 3 Shipment Information

Total Packages 1 Total Weight 1 lbs. 1 in.  
Shipper's Load and Count/SLAC 1 kg 1 DIM 1 cm

| Commodity Description                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Harmonized Code | Country of Manufacture | Value for Customs                                                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|------------------------|--------------------------------------------------------------------------|
| <u>human lung tissue</u><br><u>18</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <u>300190</u>   | <u>USA</u>             | <u>\$750</u>                                                             |
| <u>non-hazardous</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                 |                        |                                                                          |
| <u>non-pathogenic</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                 |                        |                                                                          |
| Has EEI been filed in AES?<br>For U.S. Export Only: Check One <input type="checkbox"/> For EU Only: Tick here if goods are not in free circulation and provide C.I.<br><input type="checkbox"/> No EEI required, value \$2,500 or less per Schedule B Number, no license required (NLR), not subject to ITAR. If other than NLR, enter License Exception: <u>[REDACTED]</u><br><input type="checkbox"/> No EEI required, enter exemption number: <u>[REDACTED]</u><br><input type="checkbox"/> Enter AES proof of filing citation: <u>[REDACTED]</u> |                 |                        |                                                                          |
| Total Declared Value for Carriage                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                 |                        | Total Value for Customs (Specify Currency)<br><u>\$750</u><br><u>USD</u> |

For Completion Instructions, see back of fifth page.

Questions?  
Go to our Web site at [fedex.com](http://fedex.com).

or  
In the U.S., call 1.800.GoFedEx 1.800.463.3339.  
Outside the U.S., call your local FedEx office.

The terms and conditions of service may vary from country to country. Consult our local office for specific information.  
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## The World On Time.

Not all services and options are available to all destinations.

### 4a Express Package Service Packages up to 150 lbs. / 68 kg

☒ FedEx Intl. Priority ☐ FedEx Intl. First Available to select locations. ☐ FedEx Intl. Economy FedEx Envelope and FedEx Pak rate not available.

### 4b Express Freight Service Packages over 150 lbs. / 68 kg

☐ FedEx Intl. Priority Freight ☐ FedEx Intl. Economy Freight

Booking Number RECEIVED  
Please call your local FedEx office to book shipments.

### 5 Packaging These unique brown boxes with special pricing are provided by FedEx for FedEx Intl. Priority only.

☐ FedEx Envelope ☐ FedEx Pak ☐ FedEx Box ☐ FedEx Tube  
☒ Other ☐ FedEx 10kg Box\* ☐ FedEx 25kg Box\*

### 6a Special Handling

☐ HOLD at FedEx Location ☐ SATURDAY Delivery Available to select locations for FedEx Intl. Priority and FedEx Intl. Priority Freight only.  
Does this shipment contain dangerous goods?  
☒ No ☐ Yes As per attached Shipper's Declaration. ☐ Yes Shipper's Declaration not required. ☐ Dry Ice Dry Ice, 5, UN 1845 ☐ Cargo Aircraft Only

Dangerous goods (including dry ice) cannot be shipped in FedEx packaging or placed in a FedEx Express Drop Box.

### 6b Broker Selection Not available with FedEx Intl. First. Intl. Broker Select To specify a broker other than FedEx.

Broker's Name [REDACTED]  
City / State / Province / Country [REDACTED]  
ZIP / Postal Code [REDACTED] Phone [REDACTED]

### 7 Payment Complete payment options for both transportation charges and duties and taxes.

Bill transportation charges to:  
☐ Sender Acct. No. In Section 1 will be billed. ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash / Check / Cheque  
FedEx Acct. No. [REDACTED] FedEx Use Only  
Credit Card No. [REDACTED]  
Credit Card Exp. Date [REDACTED]

Bill duties and taxes to:  
Enter FedEx Acct. No. below. ☐ Sender Acct. No. In Section 1 will be billed. ☒ Recipient ☐ Third Party  
FedEx Acct. No. [REDACTED]  
All shipments may be subject to Customs charges, which FedEx does not estimate prior to clearance.

### 8 Your Internal Billing Reference First 24 characters will appear on invoice.

2-13-13 18 00000000000000000000

### 9 Required Signature Use of this Air Waybill constitutes your agreement to the Conditions of Contract on the back of this Air Waybill, and you represent that this shipment does not require a U.S. State Department license. Certain international treaties, including the Warsaw Convention, may apply to this shipment and limit our liability for damage, loss, or delay, as described in the Conditions of Contract.

WARNING: These commodities, technology, or software were exported from the United States in accordance with Export Administration regulations. Diversion contrary to U.S. law prohibited.

Sender's Signature: [REDACTED] 2/13/13  
This is not authorization to deliver this shipment without a recipient signature.

FedEx Courier Receipt: [REDACTED] Date: [REDACTED]  
For letter of credit shipments only.

Ship and track packages at [fedex.com](http://fedex.com)

FedEx Tracking Number 8000 9390 5040 Form ID No. 0425

569

PART 158412 • Rev. Date 11/05  
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UNM03485



1501 RENAISSANCE BLVD  
ALBUQUERQUE, NM 87107

Location: ABQA  
Device ID: ABQA-POS1  
Employee: 874695  
Transaction: 78075930405

INTL PRIORITY

800093905040 7.05 lb (S) \*\*\*  
Total Declared Value 750

Bill Recipient/Third Party

\*\*\* See payer invoice

H = Weight entered manually  
S = Weight read from scale  
T = Taxable item

Subject to additional charges. See FedEx Service Guide  
at [fedex.com](http://fedex.com) for details. All merchandise sales final.

Visit us at: [fedex.com](http://fedex.com)  
Or call 1.800.GoFedEx  
1.800.463.3339

February 13, 2013 5:27:26 PM

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UNM03486



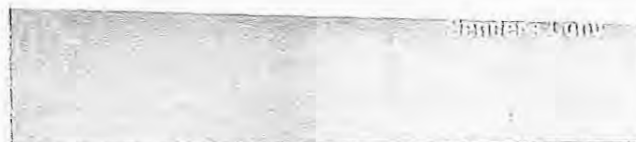
## Expanded Service International Air Waybill

For FedEx services worldwide including express freight services, dangerous goods, broker select, and letter of credit.

1 From Please print and press hard.  
Date 02/04/2013 Sender's FedEx Account Number [REDACTED]  
Sender's Name [REDACTED] Phone 505- [REDACTED]  
Company University of New Mexico  
Address 915 Camino de Salud NE  
Address [REDACTED]  
City Albuquerque State NM Province NM  
Country USA ZIP Postal Code 87131

2 To  
Recipient's Name [REDACTED] Phone 780- [REDACTED]  
Company University of Alberta  
Address 3-032 Katz Dept/Floor [REDACTED]  
Address [Speed code PD437]  
City Edmonton State AB Province AB  
Country CAN ZIP Postal Code T6G 2S2  
Recipient's Tax ID Number for Customs Purposes  
e.g., GST/VAT/IN/EN/ABN, or as locally required.

3 Shipment Information  
Total Packages 1 Shipper's Load and Count/SLAC  
Total Weight 4 kg DIM 1 / 1 / 1 lbs. 8 / 1 / 1 in. cm  
Commodity Description human lung tissue Harmonized Code 300190 Country of Manufacture USA Value for Customs 1750.00  
-non-hazardous  
-non-pathogenic  
Has EEI been filed in AEST? ☐ For U.S. Export Only Check One ☐ For EU Only: Tick here if goods are not in free circulation and provide CL. Total Declared Value for Carriage 1750.00  
☐ No EEI required, value \$2,500 or less per Schedule B Number, no license required (NLR), not subject to ITAR. If other than NLR, enter License Exception: [REDACTED]  
☐ No EEI required, enter exemption number: [REDACTED]  
☐ Enter AEST proof of filing citation: [REDACTED]  
Total Value for Customs (Specify Currency) 1750.00 USD



Not all services and options are available to all destinations.  
4a Express Package Service Packages up to 150 lbs. / 68 kg  
☒ FedEx Intl. Priority ☐ FedEx Intl. First Available to select locations. ☐ FedEx Intl. Economy FedEx Envelope and FedEx Pak rate not available.

4b Express Freight Service Packages over 150 lbs. / 68 kg  
☐ FedEx Intl. Priority Freight ☐ FedEx Intl. Economy Freight  
Booking Number REQUIRED  
Please call your local FedEx office to book shipments.

5 Packaging \*These unique brown boxes with special pricing are provided by FedEx for FedEx Intl. Priority only.  
☐ FedEx Envelope ☐ FedEx Pak ☐ FedEx Box ☐ FedEx Tube  
☒ Other ☐ FedEx 10kg Box\* ☐ FedEx 25kg Box\*

6a Special Handling  
☐ HOLD at FedEx Location ☐ SATURDAY Delivery Available to select locations for FedEx Intl. Priority and FedEx Intl. Priority Freight only.  
Does this shipment contain dangerous goods? ☒ No ☐ Yes As per attached Shipper's Declaration. ☐ Yes Shipper's Declaration not required. ☐ Dry Ice Dry Ice, 9, UN 1845 x kg ☐ Cargo Aircraft Only  
Dangerous goods (including dry ice) cannot be shipped in FedEx packaging or placed in a FedEx Express Drop Box.

6b Broker Selection Not available with FedEx Intl. First. ☐ Intl. Broker Select To specify a broker other than FedEx.  
Broker's Name [REDACTED]  
City / State / Province / Country [REDACTED]  
ZIP / Postal Code [REDACTED] Phone [REDACTED]

7 Payment Complete payment options for both transportation charges and duties and taxes.  
Bill transportation charges to:  
☐ Sender Acct. No. in Section 1 will be billed. ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash Check/ Cheque FedEx Use Only  
FedEx Acct. No. [REDACTED]  
Credit Card No. [REDACTED]  
Credit Card Exp. Date [REDACTED]

Bill duties and taxes to: ALL shipments may be subject to Customs charges, which FedEx does not estimate prior to clearance.  
☐ Sender Acct. No. in Section 1 will be billed. ☒ Recipient ☐ Third Party  
Enter FedEx Acct. No. below: [REDACTED]  
FedEx Acct. No. [REDACTED]

8 Your Internal Billing Reference First 24 characters will appear on invoice  
2-6-13 17.8

9 Required Signature  
Use of this Air Waybill constitutes your agreement to the Conditions of Contract on the back of this Air Waybill, and you represent that this shipment does not require a U.S. State Department license. Certain international treaties, including the Warsaw Convention, may apply to this shipment and limit our liability for damage, loss, or delay, as described in the Conditions of Contract.  
WARNING: These commodities, technology, or software were exported from the United States in accordance with Export Administration regulations. Diversion contrary to U.S. law prohibited.  
Sender's Signature: [REDACTED]  
This is not authorized for use as a signature.  
FedEx Courier Receipt: [REDACTED] Date: [REDACTED]  
For letter of credit shipments only.



FedEx Tracking Number 8000 9390 5039 Form 10 No. 042!

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The terms and conditions of service may vary from country to country. Consult our local office for specific information.  
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UNM03487





3720 SPIRIT DRIVE S E  
ALBUQUERQUE, NM 87106

Location: ABQR  
Device ID: ABQR-POS2  
Employee: 399382  
Transaction: 78075301527

---

INTL PRIORITY  
800093905039 3.64 lb (S) 84.39  
Total Declared Value 750

Shipment subtotal: 84.39

Total Due: 84.39

FedEx Account: 84.39  
\*\*\*\* [REDACTED]

M = Weight entered manually  
S = Weight read from scale  
T = Taxable item

Subject to additional charges. See FedEx Service Guide  
at [fedex.com](http://fedex.com) for details. All merchandise sales final.

Visit us at: [fedex.com](http://fedex.com)  
Or call 1.800.GoFedEx  
1.800.463.3339

February 6, 2013 5:20:56 PM

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UNM03488



## Expanded Service International Air Waybill

For FedEx services worldwide including express freight services,  
dangerous goods, broker select, and letter of credit.

### 1 From Please print and press hard.

Date 11/28/2012 Sender's FedEx Account Number [REDACTED] DUPLICATE ONLY

Sender's Name [REDACTED] Phone 505- [REDACTED]

Company Univ. of New Mexico

Address [REDACTED]

Address 915 Camino de Salud NE

City Albuquerque State NM

Country USA ZIP Postal Code 87131

2 To Recipient's Name [REDACTED] Phone 780- [REDACTED]

Company University of Alberta

Address 3-032 Katz

Dept/Floor

Address [speedcode PD437]

City Edmonton State AB

Country CAN ZIP Postal Code T6G 2S2

Recipient's Tax ID Number for Customs Purposes  
e.g., GST/RFC/VAT/IN/EIN/ABN, or as locally required.

### 3 Shipment Information

Total Packages 1 Total Weight 1 lbs. 1 in. 1 kg 1 DIM 1 / 1 / 1 cm

| Commodity Description    | Harmonized Code | Country of Manufacture | Value for Customs |
|--------------------------|-----------------|------------------------|-------------------|
| <u>human lung tissue</u> | <u>300190</u>   | <u>USA</u>             | <u>\$750</u>      |
| <u>17.4, 16.7, 15</u>    |                 |                        |                   |
| <u>non-hazardous</u>     |                 |                        |                   |
| <u>non-pathogenic</u>    |                 |                        |                   |
|                          |                 |                        |                   |
|                          |                 |                        |                   |
|                          |                 |                        |                   |
|                          |                 |                        |                   |

|                                                                                                                                        |                                                                                                       |                                   |                                            |
|----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|-----------------------------------|--------------------------------------------|
| Has EEI been filed in AES?<br><small>For U.S. Export Only: Check One</small>                                                           | <input type="checkbox"/> For EU Only: Tick here if goods are not in free circulation and provide C.I. | Total Declared Value for Carriage | Total Value for Customs (Specify Currency) |
| <input type="checkbox"/> No EEI required, value \$2,500 or less per Schedule B Number, no license required (NLR), not subject to ITAR. |                                                                                                       |                                   |                                            |
| <input type="checkbox"/> No EEI required, enter exemption number: _____                                                                | Other than NLR, enter License Exception: _____                                                        |                                   |                                            |
| <input type="checkbox"/> Yes - Enter AES proof of filing citation: _____                                                               |                                                                                                       |                                   | <u>\$750- USD</u>                          |

For Completion Instructions, see back of fifth page.

Questions?  
Go to our Web site at [fedex.com](http://fedex.com).

or  
In the U.S., call 1.800.GoFedEx 1.800.463.3339.  
Outside the U.S., call your local FedEx office.

The terms and conditions of service may vary from country to country. Consult our local office for specific information.  
Non-Negotiable International Air Waybill • ©1994-2008 FedEx

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## The World On Time.

Not all services and options are available to all destinations.

### 4a Express Package Service Packages up to 150 lbs. / 68 kg

☒ FedEx Intl. Priority ☐ FedEx Intl. First Available to select locations. ☐ FedEx Intl. Economy FedEx Envelope and FedEx Pak rate not available.

### 4b Express Freight Service Packages over 150 lbs. / 68 kg

☐ FedEx Intl. Priority Freight ☐ FedEx Intl. Economy Freight

Booking Number 888888  
Please call your local FedEx office to book shipments.

### 5 Packaging \*These unique brown boxes with special pricing are provided by FedEx for FedEx Intl. Priority only.

☐ FedEx Envelope ☐ FedEx Pak ☐ FedEx Box ☐ FedEx Tube  
☒ Other ☐ FedEx 10kg Box\* ☐ FedEx 25kg Box\*

### 6a Special Handling

☐ HOLD at FedEx Location ☐ SATURDAY Delivery ☐ Available to select locations for FedEx Intl. Priority and FedEx Intl. Priority Freight only.

Does this shipment contain dangerous goods? ☒ No ☐ Yes As per attached Shipper's Declaration. ☐ Yes Shipper's Declaration not required.

☐ Dry Ice Dry Ice, 9, UN 1845 ☐ Cargo Aircraft Only

Dangerous goods (including dry ice) cannot be shipped in FedEx packaging or placed in a FedEx Express Drop Box.

### 6b Broker Selection

Not available with FedEx Intl. First. ☐ Intl. Broker Select To specify a broker other than FedEx.

Broker's Name \_\_\_\_\_

City / State / Province / Country \_\_\_\_\_

ZIP / Postal Code 00000000 Phone \_\_\_\_\_

### 7 Payment Complete payment options for both transportation charges and duties and taxes.

Bill transportation charges to: Enter FedEx Acct. No. or Credit Card No. below.

☐ Sender Acct. No. In Section 1 will be billed ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash / Check / Cheque FedEx Use Only

FedEx Acct. No. [REDACTED]

Credit Card No. \_\_\_\_\_

Credit Card Exp. Date \_\_\_\_\_

ALL shipments may be subject to Customs charges, which FedEx does not estimate prior to clearance.

Bill duties and taxes to: Enter FedEx Acct. No. below.

☐ Sender Acct. No. In Section 1 will be billed ☒ Recipient ☐ Third Party

FedEx Acct. No. [REDACTED]

### 8 Your Internal Billing Reference First 24 characters will appear on invoice.

11-28-12 17.4, 16.7, 15

### 9 Required Signature

Use of this Air Waybill constitutes your agreement to the Conditions of Contract on the back of this Air Waybill, and you represent that this shipment does not require a U.S. State Department license. Certain international treaties, including the Warsaw Convention, may apply to this shipment and limit our liability for damage, loss, or delay, as described in the Conditions of Contract.

WARNING: These commodities, technology, or software were exported from the United States in accordance with Export Administration Regulations. It is prohibited to export these commodities, technology, or software to any country on the U.S. embargo list.

Sender's Signature: [REDACTED]

This is not authorization to collect any duties or taxes.

FedEx Courier Receipt: [REDACTED] Date: \_\_\_\_\_

For letter of credit shipments only.

Ship and track packages at [fedex.com](http://fedex.com)

FedEx Tracking Number 8755 4885 6459 Form ID No. 0425

569 PART 158412 • Rev. Date 11/03 ©1994-2008 FedEx • PRINTED IN U.S.A. RRDA

UNM03489

November



1501 RENAISSANCE BLVD  
ALBUQUERQUE, NM 87107

Location: ABQA  
Device ID: ABQA-POS1  
Employee: 874695  
Transaction: 78068884516

INTL PRIORITY  
875548856459 5.75 lb (S) 90.07  
Total Declared Value 750

Shipment subtotal: 90.07

Total Due: 90.07

FedEx Account: 90.07

\*\*\*

M = Weight entered manually  
S = Weight read from scale  
T = Taxable item

Subject to additional charges. See FedEx Service Guide  
at [fedex.com](http://fedex.com) for details. All merchandise sales final.

Visit us at: [fedex.com](http://fedex.com)  
Or call 1.800.GoFedEx  
1.800.463.3339

November 28, 2012 4:48:44 PM

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UNM03490



## Expanded Service International Air Waybill

For FedEx services worldwide including express freight services,  
dangerous goods, broker select, and letter of credit.

1. **Sender's Information**  
Date: 08/08/2012  
Sender's Name: [Redacted]  
Phone: 505-[Redacted]  
Company: Univ. of New Mexico  
Address: [Redacted]  
Address: 915 Camino de Salud NE  
City: Albuquerque State: NM  
Country: USA ZIP: 87131

2. **Recipient's Information**  
Recipient's Name: [Redacted]  
Phone: 780-[Redacted]  
Company: Univ. of Alberta  
Address: 3-032 Katz  
Address: [speed code PD437]  
City: Edmonton State: AB  
Country: CAN ZIP: T6G 2S2

Recipient's Tax ID Number for Customs Purposes  
e.g., GST/RFC/VAT/INEIN/ABN, or as locally required.

### 3 Shipment Information

Total Packages: 1 Total Weight: [Redacted] lbs. [Redacted] in.  
Shipper's Load and Count/SLAC: 1 Total Weight: [Redacted] kg DIM: [Redacted] cm

| Commodity Description                                                                                                                                                                                                                                                                                                                                                     | Harmonized Code | Country of Manufacture | Value for Customs |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|------------------------|-------------------|
| human Lung Tissue 24<br>non-haz<br>non-path<br>on ice<br>(NO DRY ICE)                                                                                                                                                                                                                                                                                                     | 300190          | USA                    | 500.00            |
| Has EEI been filed in AES?<br>For U.S. Export Only, Check One:<br><input type="checkbox"/> No EEI required, value \$2,500 or less per Schedule B Number, no license required (NLR), not subject to ITAR.<br><input type="checkbox"/> No EEI required, enter exemption number: [Redacted]<br><input type="checkbox"/> Yes - Enter AES proof of filing citation: [Redacted] |                 |                        |                   |

Total Declared Value for Carriage: 500.00 USD

For Completion Instructions, see back of fifth page.

Questions?  
Go to our Web site at [fedex.com](http://fedex.com).

In the U.S., call 1.800.GoFedEx 1.800.463.3339.  
Outside the U.S., call your local FedEx office.

The terms and conditions of service may vary from country to country. Consult our local office for specific information.  
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## The World On Time.

Not all services and options are available to all destinations.

4a Express Package Service Packages up to 150 lbs. / 68 kg  
☒ FedEx Intl. Priority ☐ FedEx Intl. First Available to select locations. ☐ FedEx Intl. Economy FedEx Envelope and FedEx Pak rate not available.

4b Express Freight Service Packages over 150 lbs. / 68 kg  
☐ FedEx Intl. Priority Freight ☐ FedEx Intl. Economy Freight  
Booking Number: [Redacted]  
Please call your local FedEx office to book shipments.

5 Packaging \*These unique brown boxes with special pricing are provided by FedEx for FedEx Intl. Priority only.  
☐ FedEx Envelope ☐ FedEx Pak ☐ FedEx Box ☐ FedEx Tube  
☒ Other ☐ FedEx 10kg Box\* ☐ FedEx 25kg Box\*

6a Special Handling  
☐ HOLD at FedEx Location ☐ SATURDAY Delivery Available to select locations for FedEx Intl. Priority and FedEx Intl. Priority Freight only.  
Does this shipment contain dangerous goods?  
☒ No ☐ Yes As per attached Shipper's Declaration, not required. ☐ Dry Ice Dry Ice, 9, UN 1845 ☐ Cargo Aircraft Only  
Dangerous goods (including dry ice) cannot be shipped in FedEx packaging or placed in a FedEx Express Wrap Box.

6b Broker Selection ☐ Int'l. Broker Select To specify a broker other than FedEx.  
Broker's Name: [Redacted]  
City/State/Province/Country: [Redacted]  
ZIP/Postal Code: [Redacted] Phone: [Redacted]

7 Payment Complete payment options for both transportation charges and duties and taxes.  
Bill transportation charges to:  
☐ Sender Acct. No. in Section 1 will be billed. ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check/Cheque  
FedEx Acct. No.: [Redacted] FedEx Use Only  
Credit Card No.: [Redacted]  
Credit Card Exp. Date: [Redacted]

Bill duties and taxes to:  
☐ Sender Acct. No. in Section 1 will be billed. ☒ Recipient ☐ Third Party  
FedEx Acct. No.: [Redacted]

8 Your Internal Billing Reference  
8/8/12 24 INTERNAL

9 Required Signature  
Use of this Air Waybill constitutes your agreement to the Conditions of Contract on the back of this Air Waybill, and you represent that this shipment does not require a U.S. State Department license. Certain international treaties, including the Warsaw Convention, may apply to this shipment and limit our liability for damage, loss, or delay, as described in the Conditions of Contract.  
WARNING: These commodities, technology, or software were exported from the United States in accordance with Export Administration Regulations. It is prohibited to re-export, transfer, or otherwise dispose of these commodities, technology, or software without a license from the U.S. Department of Commerce.  
Sender's Signature: [Redacted]  
This is not authorization to deliver this shipment without a signature.  
FedEx Courier Receipt: [Redacted] Date: 8/8/12  
For letter of credit shipments only.



FedEx Tracking Number: 8755 4885 6448 Form ID No. 0425



PART 158412 • Rev. Date 11/08  
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UNM03491

# FedEx International Air Waybill

Sender's Copy

PACKAGE LABEL

COMMERCIAL INVOICE LABEL

DELIVERY RECORD LABEL

8607 5639 0061

**1 From** *University of N.M.*  
**Date** *6-14-12* **Sender's FedEx Account Number** *[REDACTED]*  
**Sender's Name** *[REDACTED]* **Phone** *505- [REDACTED]*  
**Company** *University of N.M.*  
**Address** *[REDACTED]*  
**Address** *915 Camino de Salud NE*  
**City** *Albuquerque* **State/Province** *NM*  
**Country** *USA* **ZIP Postal Code** *87131*

**2 To** *U. of Alberta*  
**Recipient's Name** *[REDACTED]* **Phone** *780- [REDACTED]*  
**Company** *U. of Alberta*  
**Address** *3-032 Katz*  
**Address** *[speed code PD437]*  
**City** *Edmonton* **State/Province** *AB*  
**Country** *CANADA* **ZIP Postal Code** *T6G 2S2*

**3 Shipment Information**  
**Total Packages** *1* **Total Weight** *1* **kg** *1* **lb** *1* **oz** *1*  
**Commodity Description** *human lung tissue non-hazardous non-pathologic on ice*  
**Harmonized Code** *300190* **Country of Manufacture** *USA* **Value for Customs** *\$1500*  
**Has EXEMPT been filed by AES?** ☐ **Has EXEMPT been filed by AES?** ☐ **Has EXEMPT been filed by AES?** ☐  
**Has EXEMPT been filed by AES?** ☐ **Has EXEMPT been filed by AES?** ☐ **Has EXEMPT been filed by AES?** ☐  
**Has EXEMPT been filed by AES?** ☐ **Has EXEMPT been filed by AES?** ☐ **Has EXEMPT been filed by AES?** ☐

**4 Express Package Service**  
☒ **FedEx Intl. Priority** ☐ **FedEx Intl. First**  
☐ **FedEx Intl. Economy**  
**5 Packaging**  
☐ **FedEx Envelope** ☐ **FedEx Pak** ☐ **FedEx Box** ☐ **FedEx Tube**  
☒ **Other** ☐ **FedEx 10kg Box** ☐ **FedEx 25kg Box**  
**6 Special Handling**  
☐ **HOLD at FedEx Location** ☐ **SATURDAY Delivery**  
**7a Payment: Bill transportation charges to:**  
☐ **Sender** ☒ **Recipient** ☐ **Third Party** ☐ **Credit Card** ☐ **Cash/Check/Cheque**

**7b Payment: Bill duties and taxes to:**  
☐ **Sender** ☒ **Recipient** ☐ **Third Party**

**8 Your Internal Billing Reference**  
*6-14-12 17*

**9 Required Signature**  
**Signature** *[REDACTED]*

**For Completion Instructions, see back of fifth page.**  
**8607 5639 0061** **Form ID No.** **0402**

**Ship and track packages at [fedex.com](http://fedex.com)**  
**Questions? Go to our Web site at [fedex.com](http://fedex.com).**  
**Or in the U.S., call 1.800.247.4747. Outside the U.S., call your local FedEx office.**

CONFIDENTIAL

UNM03492



# **International Air Waybill** For FedEx services worldwide.

**1 From** Please print and press hard.

Date 4-11-12 Sender's FedEx Account Number [REDACTED]

Sender's Name [REDACTED] Phone 505-[REDACTED]

Company University of N.M.

Address [REDACTED]

Address 915 Camino de Salud NE

City Albuquerque State/Province N.M.

Country USA ZIP Postal Code 87131

**2 To** Recipient's Name [REDACTED] Phone 780-[REDACTED]

Company University of Alberta

Address 3-032 Katz

Address [speed code PD437] *Please process immediately*

City Edmonton State/Province AB

Country CANADA ZIP Postal Code T6G 2S2

Recipient's Tax ID Number for Customs Purposes  
e.g., GST/RFC/VAT/VIN/ABN, or as locally required.

**3 Shipment Information** ☐ For EU Only: Tick here if goods are not in free circulation and provide C.I.

Total Packages 1 Total Weight 8 kg ☒ DIM 16 x 12 x 10 in ☐ cm

| Commodity Description<br>DETAIL REQUIRED              | Harmonized Code | Country of Manufacture | Value for Customs<br>REQUIRED |
|-------------------------------------------------------|-----------------|------------------------|-------------------------------|
| human lung tissue 17<br>non-haz<br>non-path<br>on ice | 300190          | USA                    | 400                           |
|                                                       |                 |                        |                               |
|                                                       |                 |                        |                               |

Has EE/SED been filed in AES? ☐ No EE/SED required, value \$2,500 or less per Sch. B Number, no license required (NLR, not subject to ITR). ☐ Total Declared Value for Carriage 400

☐ No EE/SED required, enter exemption number:   If other than NLR, enter License Exemption:  

☐ Yes - Enter AES proof of filing citation:  

**4 Express Package Service**

☒ FedEx Intl. Priority ☐ FedEx Intl. First  
Available to select locations. Higher rates apply.

☐ FedEx Intl. Economy  
FedEx Envelope and FedEx Pak rate not available.

**Packages up to 150 lbs./68 kg**  
For packages over 150 lbs. (68 kg), use the FedEx Expanded Service Intl. Air Waybill.

**5 Packaging**

☐ FedEx Envelope ☐ FedEx Pak ☐ FedEx Box ☐ FedEx Tube

☒ Other ☐ FedEx 10kg Box\* ☐ FedEx 25kg Box\*

\*These unique brown boxes with special pricing are provided by FedEx for FedEx Intl. Priority only.

**6 Special Handling**

☐ HOLD at FedEx Location ☐ SATURDAY Delivery  
Available to select locations for FedEx Intl. Priority only.

**7a Payment Bill transportation charges to:**

☐ Sender Acct. No. In Section 1 will be billed ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check/Choque  
FedEx Acct. No. [REDACTED] FedEx Use Only

Credit Card No.  

Credit Card Exp. Date  

**7b Payment Bill duties and taxes to:**

ALL shipments may be subject to Customs charges, which FedEx does not estimate prior to clearance.

☐ Sender Acct. No. In Section 1 will be billed ☒ Recipient ☐ Third Party

FedEx Acct. No. [REDACTED]

**8 Your Internal Billing Reference**

First 24 characters will appear on invoice.

**9 Required Signature**

Use of this Air Waybill constitutes your agreement to the Conditions of Contract on the back of this Air Waybill, and you represent that this shipment does not require a U.S. State Department License or contain dangerous goods. Certain international treaties, including the Warsaw Convention, may apply to this shipment and limit our liability for damage, loss, or delay, as described in the Conditions of Contract.

WARNING: These commodities, technology, or software were exported from the United States in accordance with Export Administration Regulations. Shipment contrary to U.S. law prohibited.

Sender's Signature: [REDACTED]

This is not authorized [REDACTED]

For Completion Instructions, see back of fifth page.

8607 5639 0050 Form ID No. 0

 Ship and track packages at [fedex.com](http://fedex.com)

The terms and conditions of service may vary from country to country. Consult our local office for specific information.  
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**Questions? Go to our Web site at [fedex.com](http://fedex.com).**  
Or in the U.S., call 1.800.247.4747. Outside the U.S., call your local FedEx office.

CONFIDENTIAL

UNM03493

# **International Air Waybill** For FedEx services worldwide.

From Please print and press hard.

Date 02/15/12

Sender's FedEx Account Number

Sender's Name

Phone 505-

Company University of New Mexico

Address

Address 915 Camino de Salud NE

City Albuquerque

State NM

Country USA

ZIP Postal Code 87131

To Recipient's Name

Phone 780-

Company University of Alberta

Address 3-032 Katz

Dept./Floor

Address [Speed Code PD437]

City Edmonton

State AB

Country CANADA

ZIP Postal Code T6G 2S2

Recipient's Tax ID Number for Customs Purposes  
e.g., GST/RFC/VAT/IN/ABN, or as locally required.

## Shipment Information

☐ For EU Only: Tick here if goods are not in free circulation and provide C.I.

Total Packages  
Shipper's Load and Count/SLAC

Total Weight

lbs. kg

DIM

/ in. cm

Commodity Description  
DETAIL REQUIRED

Harmonized Code

Country of Manufacture

Value for Customs  
REQUIRED

human lung tissue 14.6  
non-hazardous  
non-pathogenic  
on ice

300190

USA

300 USD

EEI/SED been filed in AES?

☐ No EEI/SED required, value \$2,500 or less per Sch. B Number, no license required (NLR), not subject to ITR.

No EEI/SED required, enter exemption number.

If other than NLR, enter License Exemption:

Yes - Enter AES proof of filing date:

Total Declared Value  
(for Carriage)

Total Value  
(for Customs)

\$300  
USD

## 4 Express Package Service

☒ FedEx Intl. Priority

☐ FedEx Intl. First  
Available to select locations.  
Higher rates apply.

**Packages up to 150 lbs./68 kg**  
For packages over 150 lbs. (68 kg), use the  
FedEx Expanded Service Intl. Air Waybill.

Not all services and options are available to all destinations. Dangerous goods can be shipped using the Air Waybill.

☐

☐ FedEx Intl. Economy  
FedEx Envelope and FedEx Pak rate not available.

## 5 Packaging

\*These unique brown boxes with special pricing are provided by FedEx for FedEx Intl. Priority only.

☐ FedEx Envelope

☐ FedEx Pak

☐ FedEx Box

☐ FedEx Tube

☒ Other

☐ FedEx 10kg Box\*

☐ FedEx 25kg Box\*

## 6 Special Handling

☐ HOLD at FedEx Location

☐ SATURDAY Delivery

Available to select locations for FedEx Intl. Priority only.

## 7a Payment Bill transportation charges to:

☐ Sender Acct. No. In Section 1 will be billed.

Enter FedEx Acct. No. or Credit Card No. below:  
☒ Recipient ☐ Third Party ☐ Credit Card

☐ Cash Check/ Cheque

FedEx Acct. No.

Credit Card No.

Credit Card Exp. Date

## 7b Payment Bill duties and taxes to:

ALL shipments may be subject to Customs charges, which FedEx does not estimate prior to clearance.

☐ Sender Acct. No. In Section 1 will be billed.

Enter FedEx Acct. No. below:  
☒ Recipient ☐ Third Party

FedEx Acct. No.

## 8 Your Internal Billing Reference

First 24 characters will appear on invoice.

## 9 Required Signature

Use of this Air Waybill constitutes your agreement to the Conditions of Contract on the back of this Air Waybill, and you represent that this shipment does not require a U.S. State Department License or contain dangerous goods. Certain international treaties, including the Warsaw Convention, may apply to this shipment and limit our liability for damage, loss, or delay, as described in the Conditions of Contract. WARNING: These commodities, technology, or software were exported from the United States in accordance with Export Administration Regulations. Sender's Signature: [Signature]

This is not authorized.

For Completion Instructions, see back of fifth page.

FedEx Tracking Number

**8607 5639 0040**

Form 10 No.

**521**

PART 155499-Rev.  
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**040**



**Ship and track packages at fedex.com**

The terms and conditions of service may vary from country to country. Consult our local office for specific information.  
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**Questions? Go to our Web site at fedex.com.**

Or in the U.S., call 1.800.247.4747. Outside the U.S., call your local FedEx office.

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UNM03494

# **International Air Waybill** For FedEx services worldwide.

**1 From** *Please print and press hard.*

Date 01/18/2012 Sender's FedEx Account Number [Redacted]

Sender's Name [Redacted] Phone 505-[Redacted]

Company University of New Mexico

Address [Redacted]

Address 915 Camino de Salud NE

City Albuquerque State NM

Country USA ZIP Postal Code 87131

**2 To**

Recipient's Name [Redacted] Phone 780-[Redacted]

Company University of Alberta

Address 3-032 Katz

Address [Speed Code PD437] *Please process immediately*

City Edmonton State AB

Country CANADA ZIP Postal Code T6G 2S2

Recipient's Tax ID Number for Customs Purposes  
e.g., GST/VAT/NEIN/ADN, or as locally required.

**3 Shipment Information** ☐ For EU Only. Tick here if goods are not in free circulation and provide C.L.

Total Packages 1 Total Weight 5 ☒ kg ☐ DIM 10, 10, 12 ☒ cm

| Commodity Description<br>DETAIL REQUIRED | Harmonized Code | Country of Manufacture | Value for Customs<br>REQUIRED |
|------------------------------------------|-----------------|------------------------|-------------------------------|
| human lung tissue                        | 300190          | USA                    | 300.00                        |
| non-hazardous 14wk                       |                 |                        |                               |
| non-pathologic                           |                 |                        |                               |

Has EE/SED been filed in AES? ☐ No EE/SED required, value \$2,500 or less per Sch. B Number, no license required (NLR), not subject to ITR. ☐ Yes - Enter: AES proof of filing citation.

Total Declared Value for Carriage 300 USD

**4 Express Package Service**

☒ FedEx Intl. Priority ☐ FedEx Intl. First Available to select locations. Higher rates apply.

☐ FedEx Intl. Economy FedEx Envelope and FedEx Pak rate not available.

Packages up to 150 lbs. / 68 kg for packages over 150 lbs. (68 kg), use the FedEx Expanded Service Intl. Air Waybill.

Not all service options are available to all destinations. Dangerous goods may be shipped on Air Waybill.

**5 Packaging** *\*These unique brown boxes with special pricing are provided by FedEx for FedEx Intl. Priority only.*

☐ FedEx Envelope ☐ FedEx Pak ☐ FedEx Box ☐ FedEx Tube

☒ Other ☐ FedEx 10kg Box\* ☐ FedEx 25kg Box\*

**6 Special Handling**

☐ HOLD at FedEx Location ☐ SATURDAY Delivery Available to select locations for FedEx Intl. Priority only.

**7a Payment Bill transportation charges for:**

Enter FedEx Acct. No. or Credit Card No. below.

☐ Sender Acct. No. In Section 1 will be billed. ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check/Cheque

FedEx Acct. No. [Redacted] FedEx Use Only

Credit Card No. [Redacted]

Credit Card Exp. Date [Redacted]

**7b Payment Bill duties and taxes for:** *ALL shipments may be subject to Customs charges, which FedEx does not estimate prior to clearance.*

Enter FedEx Acct. No. below.

☐ Sender Acct. No. In Section 1 will be billed. ☒ Recipient ☐ Third Party

FedEx Acct. No. [Redacted]

**8 Your Internal Billing Reference** *First 24 characters will appear on invoice.*

**9 Required Signature**

Use of this Air Waybill constitutes your agreement to the Conditions of Contract on the back of this Air Waybill, and you represent that this shipment does not require a U.S. State Department License or contain dangerous goods. Certain international treaties, including the Warsaw Convention, may apply to this shipment and limit our liability for damage, loss, or delay, as described in the Conditions of Contract. **WARNING:** These commodities, technology, or software were exported from the United States in accordance with Export Administration Regulations and are subject to the U.S. Export Administration Regulations. Sender's Signature: [Redacted]

This is not authorization.

For Completion Instructions, see back of fifth page.

FedEx Tracking Number 8607 5639 0039 Form ID No. 01

 **Ship and track packages at [fedex.com](http://fedex.com)**

The terms and conditions of service may vary from country to country. Consult our local office for specific information. Non-Negotiable International Air Waybill • ©1994-2006 FedEx

**Questions? Go to our Web site at [fedex.com](http://fedex.com).**

Or in the U.S., call 1.800.247.4747. Outside the U.S., call your local FedEx office.

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UNM03495



# FedEx International Air Waybill

Express For FedEx services worldwide.

1 From Please print and attach.  
Date 1-11-2012 Sender's FedEx Account Number [REDACTED]

Sender's Name [REDACTED] Phone 505. [REDACTED]

Company University of New Mexico

Address [REDACTED]

Address 915 Camino de Salud NE

City Albuquerque State NM

Country USA ZIP Postal Code 87131

2 To Recipient's Name [REDACTED] Phone 780- [REDACTED]

Company University of Alberta

Address 3-032 Katz

Address Speed code PD437

City Edmonton State AB

Country CANADA ZIP Postal Code T6G 2S2

Recipient's Tax ID Number for Customs Purposes  
e.g., GST/RTQ/VAT/IN/EN/ABN, or as locally required.

3 Shipment Information ☐ For EU Only: Tick here if goods are not in free circulation and provide C.I.  
Total Packages 1 Total Weight 1 lbs. 0 kg 0 DIM 1 in. 0 cm

| Commodity Description<br>DETAIL REQUIRED                                                                                                                                                                                                                               | Harmonized Code | Country of<br>Manufacture                                      | Value for Customs<br>REQUIRED |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|----------------------------------------------------------------|-------------------------------|
| <u>Human Lung Tissue</u><br><u>non-hazardous</u><br><u>non-pathologic</u>                                                                                                                                                                                              | <u>300190</u>   | <u>USA</u>                                                     | <u>300.00</u>                 |
|                                                                                                                                                                                                                                                                        |                 | <u>1.5 wk</u>                                                  |                               |
| Has EE/SED been filed in AES?<br>For U.S. Export only: Check One<br><input type="checkbox"/> No EE/SED required, enter exemption number: <u>                    </u><br><input type="checkbox"/> Yes - Enter AES proof of filing citation: <u>                    </u> |                 | Total Declared Value<br>(for Carriage)<br><u>300.00</u><br>USD |                               |

## 4 Express Package Service

☒ FedEx Intl. Priority ☒ FedEx Intl. First ☐ FedEx Intl. Economy

Packages up to 150 lbs./68 kg  
For packages over 150 lbs./68 kg, see the  
FedEx Expanded Service Intl. Air Waybill.

Not all service  
options are av-  
to all destinati-  
Dangerous goods  
be shipped via  
Air Waybill.

## 5 Packaging

☐ FedEx Envelope ☐ FedEx Pak ☐ FedEx Box ☐ FedEx Tube  
☒ Other ☐ FedEx 10kg Box\* ☐ FedEx 25kg Box\*

\*These unique brown boxes with special pricing are  
provided by FedEx for FedEx Intl. Priority only.

## 6 Special Handling

☒ HOLD at FedEx Location ☐ SATURDAY Delivery  
Available to select locations for FedEx Intl. Priority only.

## 7a Payment Bill transportation charges to:

Enter FedEx Acct. No. or Credit Card No. below:  
☐ Sender Acct. No. in Section 1 will be billed ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash Check/ Cheque  
FedEx Acct. No. [REDACTED] FedEx Use Only

## 7b Payment Bill duties and taxes to:

ALL shipments may be subject to Customs charges,  
which FedEx does not estimate prior to clearance.

Enter FedEx Acct. No. below:  
☐ Sender Acct. No. in Section 1 will be billed ☒ Recipient ☐ Third Party  
FedEx Acct. No. [REDACTED]

## 8 Your Internal Billing Reference

First 24 characters will appear on invoice.

## 9 Required Signature

Use of this Air Waybill constitutes your agreement to the Conditions of Contract on the back of this Air Waybill, and you represent that this shipment does not require a U.S. State Department License or contain dangerous goods. Certain international treaties, including the Warsaw Convention, may apply to this shipment and limit our liability for damage, loss, or delay, as described in the Conditions of Contract. WARNING: These commodities, technology, or software were exported from the United States in accordance with Export Administration Regulations. Re-export contrary to U.S. law prohibited.

Sender's Signature:

This is not authorized

For Completion Instructions, see back of fifth page.

FedEx  
Tracking  
Number

8607 5639 0028

Form  
ID No.



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UNM03496









# **FEDEX** International Air Waybill Express For FedEx services worldwide.

From Please print and press hard.

Date 06/27/12 Sender's FedEx Account Number [REDACTED]

Sender's Name [REDACTED] Phone 505-[REDACTED]

Company Univ. of N.M.

Address [REDACTED]

Address 915 Camino de Salud NE

City Albuquerque State NM

Country USA ZIP Postal Code 87131

To Recipient's Name [REDACTED] Phone 780-[REDACTED]

Company Univ. of Alberta

Address 3-032 Katz

Address [Speed code PD437]

City Edmonton State AB

Country CAN ZIP Postal Code T6G 2S2

Recipient's Tax ID Number for Customs Purposes  
e.g., GST/REG/VAT/NEIN/ABN, or as locally required.

**Shipment Information** ☐ For EU Only: Tick here if goods are not in free circulation and provide C.I.

Total Packages 1 Shipper's Load and Count SLAC 1 Total Weight 1 lbs. 1 kg 1 DIM 1 in. 1 cm

| Commodity Description<br><small>DETAIL REQUIRED</small> | Harmonized Code | Country of Manufacture | Value for Customs<br><small>REQUIRED</small> |
|---------------------------------------------------------|-----------------|------------------------|----------------------------------------------|
| <u>human lung tissue</u>                                | <u>300190</u>   | <u>USA</u>             | <u>400.00</u>                                |
| <u>non-haz</u>                                          |                 |                        |                                              |
| <u>non-path</u>                                         |                 |                        |                                              |
| <u>on ice</u>                                           |                 |                        |                                              |

EE/VED been filed in AES? ☐ No EE/VED required, value \$2,500 or less per Sch. B Number, report only; Check One ☐ No license required (NLR), not subject to (TAR) ☐ If other than NLR, enter License Exception: 400.00

EE/VED required, enter exemption number: 400.00

s- Enter AES proof of filing citation:

**4 Express Package Service**  
☒ FedEx Intl. Priority ☐ FedEx Intl. First Available to select locations. Higher rates apply.  
☐ FedEx Intl. Economy FedEx Envelope and FedEx Pak rate not available.

**5 Packaging**  
☐ FedEx Envelope ☐ FedEx Pak ☐ FedEx Box ☐ FedEx Tube  
☒ Other ☐ FedEx 10kg Box\* ☐ FedEx 25kg Box\*  
\*These unique brown boxes with special pricing are provided by FedEx for FedEx Intl. Priority only.

**6 Special Handling**  
☐ HOLD at FedEx Location ☐ SATURDAY Delivery Available to select locations for FedEx Intl. Priority only.

**7a Payment Bill transportation charges to:**  
☐ Sender Acct. No. in Section 1 will be billed. ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check/Cheque FedEx Use Only

**7b Payment Bill duties and taxes to:**  
☐ Sender Acct. No. in Section 1 will be billed. ☒ Recipient ☐ Third Party ☐ Credit Card FedEx Use Only

**8 Your Internal Billing Reference** 15.6 First 24 characters will appear on invoice.

**9 Required Signature**  
 Use of this Air Waybill constitutes your agreement to the Conditions of Contract on the back of this Air Waybill, and you represent that this shipment does not require a U.S. State Department License or contain dangerous goods. Certain international treaties, including the Warsaw Convention, may apply to this shipment and limit our liability for damage, loss, or delay, as described in the Conditions of Contract.  
 WARNING: These commodities, technology, or software were exported from the United States in accordance with Export Administration Regulations. Diversion contrary to U.S. Law prohibited.  
 Sender's Signature: [REDACTED]  
 This is not authorized.

Not all services and options are available to all destinations. Dangerous goods can be shipped using this Air Waybill.

For Completion Instructions, see back of fifth page.

FedEx Tracking Number

8607 5639 0072

Form ID No.



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0402

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UNM03501

# **International Air Waybill** For FedEx services worldwide.

**From** Please print and press hard.  
**Site** 6-14-12  
**Sender's FedEx Account Number** [Redacted]  
**Under's name** [Redacted]  
**Phone** 505- [Redacted]

**Company** University of N.M.  
**Address** [Redacted]  
**Address** 915 Camino de Salud NE  
**City** Albuquerque  
**State** NM  
**Country** USA  
**ZIP Postal Code** 87131

**Shipper's name** [Redacted]  
**Phone** 780- [Redacted]  
**Company** U. of Alberta  
**Address** 3-032 Katz  
**Address** [Speed code PD437]  
**City** Edmonton  
**State** AB  
**Country** CANADA  
**ZIP Postal Code** T6G 2S2

**Shipper's Tax ID Number for Customs Purposes**  
 15T/REG/VAT/IN/EN/ARM, or as locally required.

**Shipment Information** ☐ For EU Only: Tick here if goods are not in free circulation and provide C.I.

**1 Packages** 1 **Total Weight** 7.7 kg **DIM** 1 1 1 in cm

| Commodity Description<br>DETAIL REQUIRED | Harmonized Code | Country of<br>Manufacture | Value for Customs<br>REQUIRED |
|------------------------------------------|-----------------|---------------------------|-------------------------------|
| non-hazardous                            | 300190          | USA                       | \$1500                        |
| non-hazardous                            |                 |                           |                               |
| non-hazardous                            |                 |                           |                               |
| on ice                                   |                 |                           |                               |

**I have filed in AES?** ☐ No EEVSED required, value \$2500 or less per Sch. B Number, no license required (NLR) not subject to ITR. **Total Declared Value for Carriage**  
 ED required, enter exemption number: If other than NLR, enter License Exception: **Total Value for Customs (Specify Currency)** 1500

Attach AES proof of filing citation:

**4 Express Package Service**  
☒ FedEx Intl. Priority ☐ FedEx Intl. First Available to select locations. Higher rates apply.  
☐ FedEx Intl. Economy FedEx Envelope and FedEx Pak rate not available.

**5 Packaging**  
☐ FedEx Envelope ☐ FedEx Pak ☐ FedEx Box ☐ FedEx Tube  
☒ Other ☐ FedEx 10kg Box\* ☐ FedEx 25kg Box\*

**6 Special Handling**  
☐ HOLD at FedEx Location ☐ SATURDAY Delivery Available to select locations for FedEx Intl. Priority only.

**7a Payment Bill transportation charges to:**  
☐ Sender Acct. No. in Section 1 will be billed ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check/Cheque  
 FedEx Acct. No. [Redacted]  
 Credit Card No. [Redacted]  
 Credit Card Exp. Date [Redacted]

**7b Payment Bill duties and taxes to:**  
☐ Sender Acct. No. in Section 1 will be billed ☒ Recipient ☐ Third Party  
 FedEx Acct. No. [Redacted]

**8 Your Internal Billing Reference** First 24 characters will appear on invoice.

**9 Required Signature**  
 Use of this Air Waybill constitutes your agreement to the Conditions of Contract on the back of this Air Waybill, and you represent that this shipment does not require a U.S. State Department License or contain dangerous goods. Certain International treaties, including the Warsaw Convention, may apply to this shipment and limit our liability for damage, loss, or delay, as described in the Conditions of Contract. WARNING: These commodities, technology, or software were exported from the United States in accordance with Export Administration Regulations. Diversion contrary to U.S. law prohibited.  
 Sender's Signature: [Redacted]

This is not authorization to deliver.  
 For Completion Instructions, see back of fifth page.  
 FedEx Tracking Number 8607 5639 0061 Form ID No. 0402

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UNM03502

































# Exhibit 6.34



November 30, 2016

Jessica R. Hertz

Tel + [REDACTED]  
[REDACTED]  
[REDACTED]

VIA HAND DELIVERY AND ELECTRONIC MAIL

The Honorable Marsha Blackburn, Chair  
Select Investigative Panel  
H2-316 Ford House Office Building  
Washington, D.C. 20515

Dear Representative Blackburn:

As counsel for Southwestern Women's Options ("Southwestern"), we write in response to the letter sent by T. March Bell, Chief Counsel for the Select Investigative Panel (the "Panel"), on November 18, 2016. Southwestern provides this response without waiving any procedural or substantive objections, including those objections articulated in previous correspondence with the Panel.

Mr. Bell has inquired whether "Southwestern Women's Options or its individual personnel receive any payment from any entity in connection to their participation in research, study, or other work involving fetal tissue."

As stated in Southwestern's February 12, 2016 response to the Panel's initial request for information, Southwestern "does not sell fetal tissue or recoup expenses associated with tissue donation, nor has it ever done so." Moreover, Southwestern does not participate "in research, study, or other work involving fetal tissue."<sup>1</sup> Neither do any of Southwestern's individual personnel. Accordingly, to the best of Southwestern's knowledge, the answer to Mr. Bell's inquiry is no, and there are no documents or communications responsive to the request.

To ensure the continued safety and security of clinic staff and their families, Southwestern renews its request that its continued dialogue with the Panel be kept confidential. Southwestern further requests that, in the event that the Panel seeks to pursue disclosure of documents, interviews, or other material produced by or related to Southwestern, the Panel redact all individual names in accordance with its pledge "to do everything possible to protect names and identities" and to "do redactions as necessary to

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<sup>1</sup> See Southwestern Letter Response to Panel's Initial Request for Information (February 12, 2016), at Appendix A.

The Honorable Marsha Blackburn

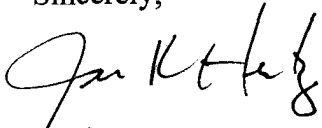
Page 2 of 2

November 30, 2016

protect privacy,”<sup>2</sup> and that Southwestern be afforded the opportunity to review any such redactions prior to any disclosures.

Please let us know if you have any questions.

Sincerely,



Jessica Hertz  
*Counsel for Southwestern Women's Options*



Mary Ellen Callahan  
*Counsel for Southwestern Women's Options*

cc: March Bell, Chief Counsel, Select Investigative Panel  
Heather Sawyer, Democratic Staff Director and General Counsel, Select Investigative Panel

---

<sup>2</sup> [http://www.huffingtonpost.com/entry/republicans-fetal-tissue-research\\_us\\_56d71ddee4b0871f60ed7512](http://www.huffingtonpost.com/entry/republicans-fetal-tissue-research_us_56d71ddee4b0871f60ed7512).

# Exhibit 6.35



THE UNIVERSITY OF NEW MEXICO • HEALTH SCIENCES CENTER

## DEPARTMENT OF PEDIATRICS

UNM  
CHILDREN'S  
HOSPITAL

March 8, 2013

Southwest Women's Options

[REDACTED]

[REDACTED]

We are embarking on a clinical study to determine the Rh status of fetuses of Rh negative women, in the hopes that we can develop a test such that these women would not need to be administered Rhogam if their fetus were also Rh negative.

In speaking with [REDACTED] yesterday, [REDACTED] understood that when your clinic is finished with the blood drawn from your patients, it is eventually discarded. If a 1-2 mL aliquot of this blood that was to be discarded were placed in an unlabeled tube, it might be used in our study.

In thinking further about this in our lab, we realized how valuable it would be to be able to match the individual patient's blood to the fetal tissue obtained. Note that there still would be no identification of patients involved, but we would need your help in matching the blood to the fetal tissue. Specifically, we would like to obtain 1-2 mL of the remaining blood sample obtained on the individual undergoing the procedure, as soon as possible after you have completed the blood type analysis. Our goal is to isolate the free fetal RNA and DNA present in the plasma, and perform molecular analyses to determine fetal Rh status. We would confirm the fetal Rh status by performing the same analysis on fetal marrow.

We would like to use all blood samples (both Rh positive and Rh negative) that you would be discarding otherwise, and a small aliquot of the remaining blood along with the fetal tissue collected that day, all de-identified.

Sincerely,

[REDACTED]

PI, DREAM Lab  
University of New Mexico

**Mailing Address:**

MSC 10 5590  
1 University of New Mexico  
Albuquerque, NM 87131-0001

**Location:**

[REDACTED]  
Albuquerque, NM 87131-0001

# Exhibit 6.36

Client Information for Informed Consent

DONATION OF FETAL TISSUE FOR MEDICAL RESEARCH

Research using fetal tissue has been used to develop vaccines and seek treatments for many diseases and disorders. At Southwestern Women's Options, we provide our patients the opportunity to donate fetal tissue from their pregnancies to medical research.

You can choose to donate tissue from your pregnancy to medical research by filling out this form. Before you give your consent, please read each of the following statements and initial the lines to the right. **If you do not want to donate tissue from your pregnancy, do not fill out this form.**

We are available to answer any questions.

Before I was given this consent form, I had already decided to have an abortion and signed a separate consent form for my abortion. \_\_\_\_\_

I agree to donate tissue from my pregnancy after my abortion to researchers at the University of New Mexico as a gift to be used for research, treatment, or education. \_\_\_\_\_

I understand that I have no control over who will receive my donation or what specific research it will be used for. \_\_\_\_\_

I understand that Southwestern Women's Options will not disclose my name or personal information in connection with my donation. \_\_\_\_\_

I understand that there will be no changes to how or when my abortion is done in order to preserve the tissue. \_\_\_\_\_

I understand that I will not be paid for this donation. \_\_\_\_\_

I understand that Southwestern Women's Options does not profit from or collect any fee associated with this donation. \_\_\_\_\_

I understand that I do not have to donate tissue from my pregnancy, and this will not affect my current or future care at Southwestern Women's Options. \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Witness: \_\_\_\_\_

Date: \_\_\_\_\_

# Exhibit 6.37

**AFFIDAVIT OF** [REDACTED]

1. My name is [REDACTED]
2. I am a resident of Bernalillo County, New Mexico.
3. I am familiar with Southwestern Women's Options and [REDACTED].
4. In the fall of 2012, I had an unexpected pregnancy.
5. I was referred to Southwestern Women's Options to receive a consultation about a possible abortion.
6. On October 5, 2012, I went to receive a consult at Southwestern Women's Options. I became hesitant and left.
7. I returned to Southwestern Women's Options on October 10, 2012 for a possible abortion.
8. As a prerequisite for the abortion, I signed an agreement attached hereto as Exhibit "A".
9. The doctors and staff at Southwestern Women's Options did not explain this consent to me.
10. I did not understand that I was allegedly giving consent for Southwestern Women's Options to donate my baby's parts to the University of New Mexico or other entities.
11. I was not explained the procedure by Southwestern Women's Options, their doctors or staff.
12. At the time I went to the visit on October 10, 2012, I knew that I was approximately 11 to 13 weeks into my pregnancy.
13. The staff at Southwestern Women's Options informed me that I was 12 to 13



weeks pregnant.

14. The staff at Southwestern Women's Options informed me that I could apply for medicaid.

15. [REDACTED] was the doctor at Southwestern Women's Options that performed my procedure.

16. I never saw [REDACTED], a physician that signed my medical records including my medicaid form.

17. [REDACTED] signed off on my medical records certifying the reasons for medicaid.

18. [REDACTED], the doctors and staff at Southwestern Women's Options failed to inform me that [REDACTED] was a volunteer faculty member of the University of New Mexico.

19. [REDACTED], the doctors and staff at Southwestern Women's Options failed to inform me that [REDACTED] was a volunteer faculty member of the University of New Mexico.

20. [REDACTED], the doctors and staff at Southwestern Women's Options failed to inform me that Southwestern Women's Options and the University of New Mexico had been collaborating on fetal tissue research since 1995.

21. [REDACTED], the doctors and staff at Southwestern Women's Options failed to inform me of the nature and extent in which the fetal tissue was going to be used.

22. At no time did [REDACTED], the doctors and staff at Southwestern Women's Options tell me which body parts were going to be used or donated.

23. At no time did [REDACTED], the doctors and staff at Southwestern Women's Options inform me that Southwestern Women's Options were the sole supplier of

body parts to the University of New Mexico.

24. At no time did [REDACTED], the doctors and staff at Southwestern Women's Options inform me of the procedures to be followed and their purposes including identification of any procedures that might be experimental if I chose to donate body parts for any research study.

25. At no time did [REDACTED], the doctors and staff at Southwestern Women's Options inform me of any attendant discomforts to be expected if I chose to donate any body parts to [REDACTED].

26. At no time did [REDACTED], the doctors and staff at Southwestern Women's Options inform me of any benefits reasonably to be expected if I chose to donate the body parts.

27. At no time did [REDACTED], the doctors and staff at Southwestern Women's Options inform me of any appropriate alternative procedures that might be an advantage to me if I chose to donate the body parts from my procedure.

28. At no time did [REDACTED], the doctors and staff at Southwestern Women's Options offer to answer any inquiries concerning the procedure if I chose to donate body parts.

29. At no time did [REDACTED], the doctors and staff at Southwestern Women's Options inform me that I was free to withdraw my consent at any time if I chose to donate the body parts from my procedure.

30. At no time was I given a separate consent to donate tissue that was separate from the consent for the procedure.

31. My abortion was ultrasound guided and I was never told why it was ultrasound

guided.

32. I asked Southwestern Women's Options for the medical records regarding the donation of tissue.

33. A true and accurate copy of the letter where I asked for the disposition of the tissue is attached as Exhibit "B".

34. I never received a response to my request for medical records. I still do not have copies of records showing how the tissue was disposed.

35. In September, 2016, I read procurement notes attached to the Select Panel on Infant Lives Criminal Referral issued on June 23, 2016.

36. I noticed that the University of New Mexico picked up brain tissue from a 11.5 week baby and a 12.7 week baby on October 17, 2012.

37. On October 5, 2012, my ultrasound stated I was 12 weeks and 2 days pregnant.

38. I believe that my baby was one of the two babies given to the University of New Mexico for their research.

39. If I had known my baby was going to be used for research I would have probably changed my mind about going through with the abortion.

40. It is my body and I feel I had a complete right to know where my baby's parts were going to be disposed and if they were to be used for experimentation.

41. I believe my rights under New Mexico and Federal Law have been violated and I request the Select Panel On Infant Lives to fully investigate my case.

42. I have suffered emotional distress and mental anguish as a result of the actions of

██████████ ██████████ and Southwestern Women's Options.

43. I will fully cooperate with the Select Panel and I will give authorization to view my medical records.

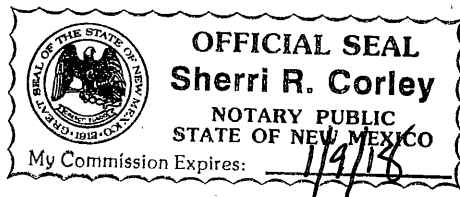
Further, Affiant sayeth not.



SUBSCRIBED AND SWORN TO before me this 15<sup>th</sup> day of November, 2016, by



  
NOTARY PUBLIC



**INFORMED CONSENT FOR  
PREGNANCY TERMINATION TREATMENT, ANESTHETIC, AND  
OTHER MEDICAL SERVICES**

Name of client [REDACTED]

Address [REDACTED]

Birth Date [REDACTED]

Date 10/5/12 10/10/12 [REDACTED]

I, [REDACTED] request and consent to the performance upon me of a pregnancy termination procedure by vacuum aspiration or standard dilation and evacuation at [REDACTED]'s office by any of the physicians employed by [REDACTED] M.D., P.C.

I further consent to the taking of cultures and performance of reasonably indicated tests and procedures, whether or not relating to presently known conditions, if my medical provider finds these necessary or advisable in the course of evaluation or treatment for pregnancy termination or management of complications.

I have fully and completely disclosed my medical history, including allergies, medical conditions, prior medications, over the counter or other drugs taken, and reactions I have had to anesthetics, medicines, or drugs. I consent to my physicians relying on this disclosure as complete.

I consent that the physician or medical staff may administer such anesthesia and medications as deemed necessary or advisable (including a medication called misoprostol given to prevent bleeding and enhance safety, which has been associated with birth defects), with the exception of *(list any medications which you do not want or are allergic to):*

NRDA

I understand that local and IV anesthetics do not always eliminate all pain, that in a small number of cases, those anesthetics cause severe reactions or even shock or death, and that no guarantee to the contrary has been made to me. I further understand that any anesthetic will affect my level of consciousness and may, in a small number of cases, cause bodily reactions or complications requiring additional measures and treatment. I understand that the affect on my level of consciousness will impair my ability to make important decisions or operate machinery; I agree to not drive for a period of 30 minutes - 24 hours postoperatively depending on medications given to me. I request and consent to local and/or IV anesthetics.

I understand that the gestation of my pregnancy is determined through multiple methods that may include a urine test, the first date of my last normal menstrual period, and ultrasound measurements taken here in the clinic. Based on these findings, I consent to treatment deemed appropriate by the physician(s) of the [REDACTED] Clinic, M.D., P.C.

I fully understand that the purpose is to terminate this pregnancy, and I affirm this to be my personal choice in light of the alternative of continuing the pregnancy to term. No one has coerced or compelled me to make this decision.

I understand that tissue and parts will be removed during the procedure, and I consent to their examination and their use in medical research and their disposal by the clinic and/or physician in the manner they deem appropriate.

I understand that the complications associated with early pregnancy termination are generally much less severe and less frequent than with childbirth. Nonetheless, I realize, as is true of childbirth and any kind of surgery, that there are inherent risks of minor and major complications and death which may occur without the fault of the physician.

No guarantee or assurance has been made to me as to the results that may be obtained. The risk of terminating a pregnancy gradually increases throughout the course of the pregnancy. These comparative risks become approximately equal at 16 -18 weeks of pregnancy and increase so that pregnancy termination at 18 weeks and above involves a greater risk than carrying the pregnancy to term.

Southwestern Women's Options Clinic 000003

Exhibit A

The risks and possible complications of pregnancy termination procedures most likely to occur, though only in a small number of cases, include the following:

**Perforation:** An instrument used in the procedure may go through the wall of the uterus. If this happens, hospitalization may be necessary for repair and/or observation of the perforation and any internal injuries and/or completion of the abortion.

**Laceration:** In rare cases, the cervical opening and/or cervical canal may be torn. A few stitches to repair the tear are usually all that is necessary. However, this complication can cause severe bleeding and require hospitalization.

**Bleeding:** This may require an immediate repeat of the abortion procedure, or hospitalization for observation and treatment. If the excessive bleeding occurs some hours or days after the abortion, hospitalization may be necessary, and dilation and curettage may need to be done to remove material retained in the uterus.

**Infections:** Infections usually respond to antibiotics, but in a few cases, hospitalization is necessary.

**Failure to Terminate Pregnancy:** (i.e. The procedure fails to end the pregnancy): It is this possibility, among others, that makes a post-operative examination essential. In such a case, another procedure must be performed, since the first one may have affected normal development of the pregnancy.

**Tubal Pregnancy:** A tubal pregnancy occurs when the fertilized egg implants in the fallopian tube instead of in the uterus. If this condition is unchecked, the fetus develops in the tube until it is large enough to burst the tube. Although the chances of a tubal pregnancy are small, the risk of death from a ruptured tubal pregnancy is very great. This procedure cannot terminate a tubal pregnancy. I understand that this is a preexisting medical condition for which [REDACTED]'s office assumes no medical or financial responsibility.

[REDACTED] **Hysterectomy** (i.e. removal of the uterus): I understand that as a result of certain conditions or some complications (such as perforating, bleeding, or severe infection) a hysterectomy may be necessary.

**Pulmonary (Lung) Embolism:** (i.e. Blood clot or amniotic fluid clot that may go to the lungs and cause difficulty breathing;) It may require transport to a hospital for evaluation and treatment.

**Infertility** Although rare, infertility may result from certain complications (such as infection) that remain untreated.

**Unintended expulsion:** When dilators are inserted and/or Misoprostol is used, the intent is to perform a D&C (suction curettage) or a standard D&E procedure. On rare occasions, unintended expulsion of products of conception may occur.

**Emotional Distress:** Individual women cope differently with pregnancy termination; most patients go through the process with minimal emotional effects, but in some cases professional help is required. I release the attending physicians and staff from any liability or responsibility for any condition that may result from this procedure, including but not limited to short range or long term psychological effects resulting from my decision to have this procedure.

I understand that my physician and/or counselor will answer any questions or concerns I have, and I will ask such questions before leaving the clinic. If I have concerns or complications after leaving, I agree to call the office of [REDACTED] M.D., P.C. immediately. I also agree to have an examination and pregnancy test in two (2) weeks after the abortion, in order to rule out a continued pregnancy or the existence of other problems.

I UNDERSTAND THAT, WHEN POSSIBLE, I MAY BE TREATED FOR ANY RESULTING COMPLICATIONS AT DR. [REDACTED] OFFICE, AT NO CHARGE TO ME; HOWEVER, SHOULD HOSPITALIZATION BE NECESSARY, I UNDERSTAND THAT I WILL BE RESPONSIBLE FOR ANY CHARGES.

I further understand that the medical practice of my physician(s) at [REDACTED] M.D., P.C. is to be judged according to those standards reasonably acceptable to other physicians practicing in similar facilities in the United States.

I certify that I have read, had explained to me, and fully understand the above informed consent, and that I agree, in light of the consent, to the pregnancy termination procedure I have requested.

Date 10/5/12 10/10/12

Signature of Client

Provider

Witness - Staff Person

Southwestern Women's Options Clinic 000004

December 2, 2015

Southwest Woman's Options  
[REDACTED] PC  
522 Lomas Blvd NE  
Albuquerque, NM 87102

Dear [REDACTED]

This is a request to release to my attorney, Michael J. Seibel, all records regarding the disposal of medical waste.

Please forward all information regarding the disposal, donation or sale of any medical waste to any other person pursuant to the release.

Sincerely,

[REDACTED]

Exhibit B